

Caltech Student Health Insurance 101

October 13, 2020

Brought to you by the GSC Health Subcommittee

Agenda

Presentation

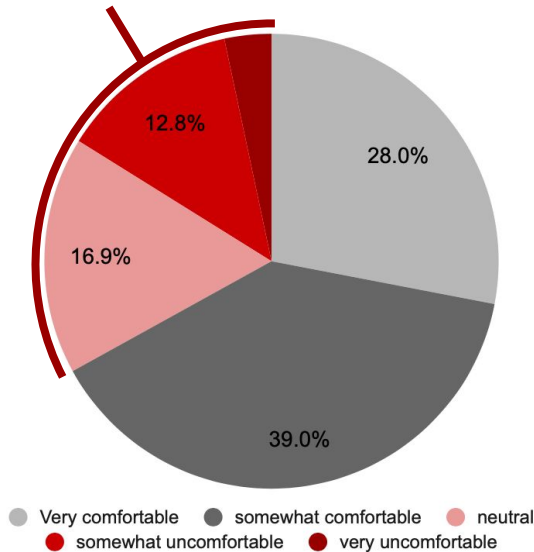
- Health Insurance Basics
 - Caltech Health Insurance Plan
- Special Cases
 - Physician's office visits
 - Mental health visits
 - Preventative care
- Navigating the Claims Process
- Prescription Drugs
- COVID-Specific Issues
- Additional resources
- Insurance Plan Selection Process

Moderated Q&A

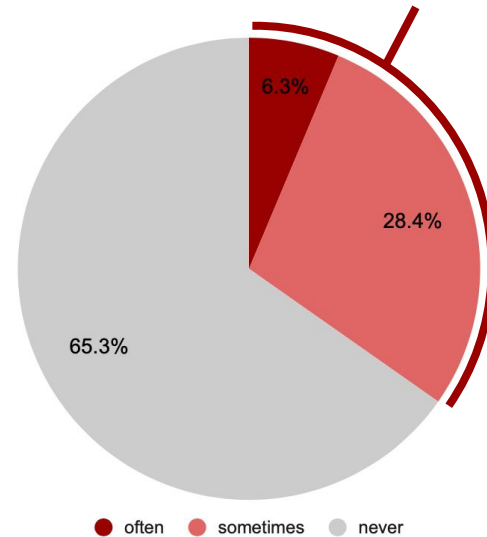
Why are we doing this?

From the 2019 GSC Survey:

About 1/3 of grads don't feel comfortable using the Caltech health insurance plan



About 1/3 of grads sometimes or often avoided medical care due to expected financial burden



Reminder: fill out the 2020 GSC survey, it is a key tool in our advocacy work!

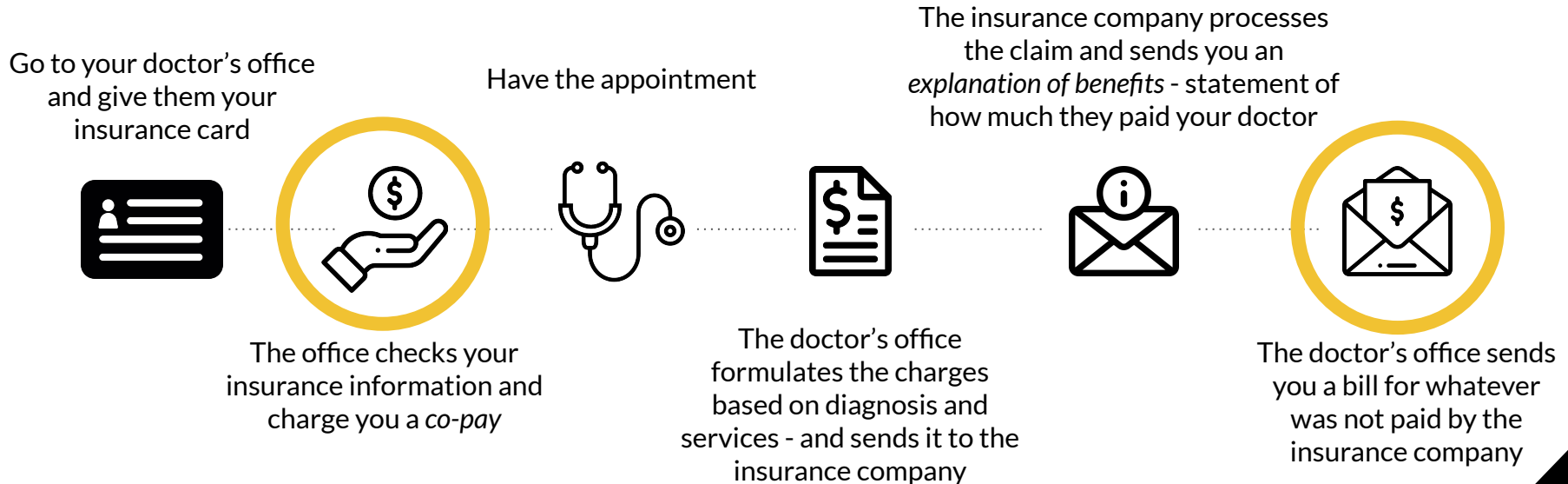
(We are giving away 30 \$50 gift cards to participants!)

Find your personalized link in an email with subject line “**2020 GSC Quality of Life Survey.**”

Health Insurance Basics

Health Insurance: Basic Schema

- You pay a fixed amount (**premium**) to be covered by an insurance plan for a certain period of time
- Whenever you use medical services, the following claim process will happen:



Caltech Student Health Insurance Plan

- Employers negotiate “group plans” with an insurance company
- The Caltech student insurance plan a group plan with **United Healthcare Student Resources (UHCSR)**
 - You can enroll your spouse, domestic partner or dependent children in the group plan
 - Caltech subsidizes the premium for grad students but not for spouse/dependents or for undergraduates enrolled in the UHCSR plan
- You must have medical insurance, either through the UHCSR plan or through another plan, but you must show it satisfies certain requirements
 - Plan marketplace: <https://www.coveredca.com>
 - [Caltech waiver requirements here](#)
 - If you are an international student with J1 status there are extra requirements imposed by the federal government
 - Caltech will NOT subsidize the premium

Caltech Student Wellness Services

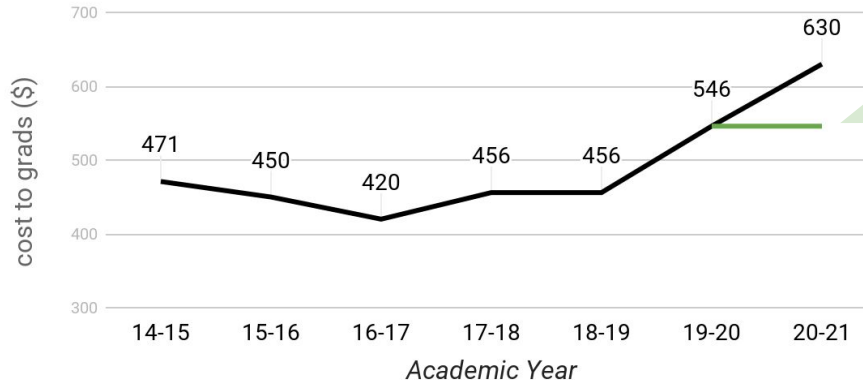
- Caltech Health Center located at 1239 Arden Rd, Pasadena, CA 91106
- Student Wellness Services is open to all registered students, regardless of which insurance plan you're on.
- You can make use of Student Wellness Services **at no cost to you. Bills are not sent to the health insurance company.**
- You should still bring your insurance information (card) with you
- Student portal to make appointments, send messages to Caltech health personnel:
https://mycaltechhealth.caltech.edu/login_directory.aspx
- If you are on the UHCSR Student Insurance Plan, you don't need to get a referral to see a specialist, you can refer yourself.



Premiums

- For the 2020-2021 academic year, UHCSR charges Caltech \$3,138 per student, of which **\$630 (20%)** is charged to graduate students Bursar accounts (**100%** is charged to undergrads)
- This is actually *below the national average* for the share of premiums paid by industry employers.¹
 - Many other universities (Harvard, Princeton, Yale, Columbia, UC Berkeley, UC Davis, Duke, MIT, USC, UCSB, UChicago) offer full premium coverage.²

Historical premium for grad students



In our petition signed by over 40% of the grad student body, we advocated for no premium increase. This demand was not met.

¹According to Kaiser Family Foundation in 2018, the average U.S. employer covers 82% of single coverage.

²Based on public and anecdotal info.

PPO vs. HMO

- There are two common types of health insurance plans: Preferred Provider Organization (PPO) and Health Management Organization (HMO)
- The Caltech student health insurance plan is a **PPO** plan

PPO	HMO
A network of healthcare providers agree to provide services at a reduced rate to clients of a certain insurance company	A group of healthcare providers work directly for or contract with the insurance company
Insurance plan covers a greater fraction of the cost for services in-network , but will still cover a (smaller) fraction for out-of-network services	Insurance coverage is limited to in-network providers only
Specialist visits don't require a referral	Specialist visits typically require a referral from a primary care provider
PPO plans tend to have higher premiums and other costs	HMO plans tend to have lower premiums and other costs

Out-of-Pocket Costs

Caltech Plan

In-network	Out-of-network
\$500	\$1000
*80%	60%
\$2000	\$5500
*\$15	-

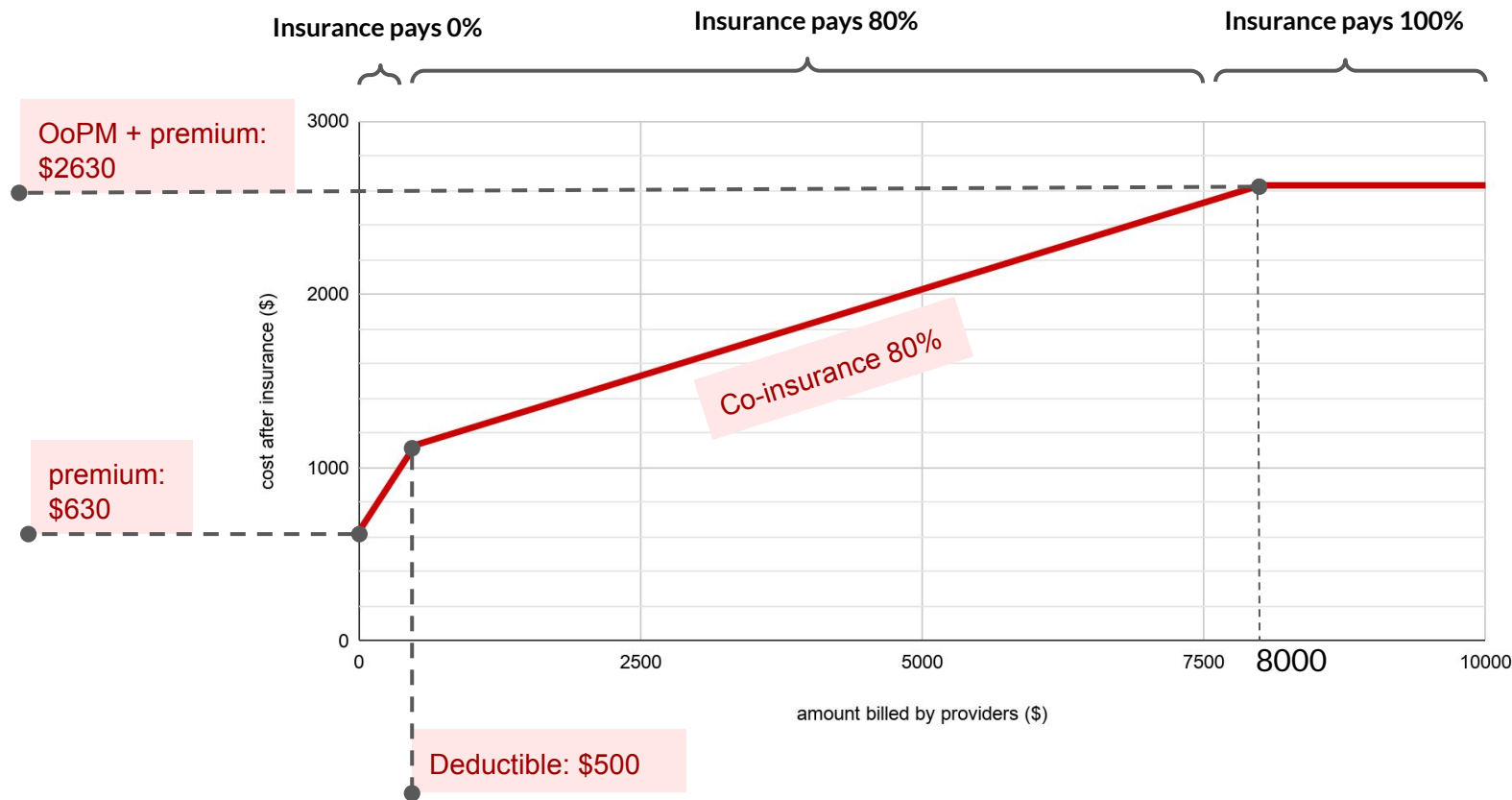
Deductible: You pay full cost of services until you have spent this amount in one insurance year

Co-insurance: Fraction of cost the insurance company pays *after* you've paid the deductible

Out of pocket maximum: After you've paid this amount, insurance covers 100% of further costs for the rest of the insurance year

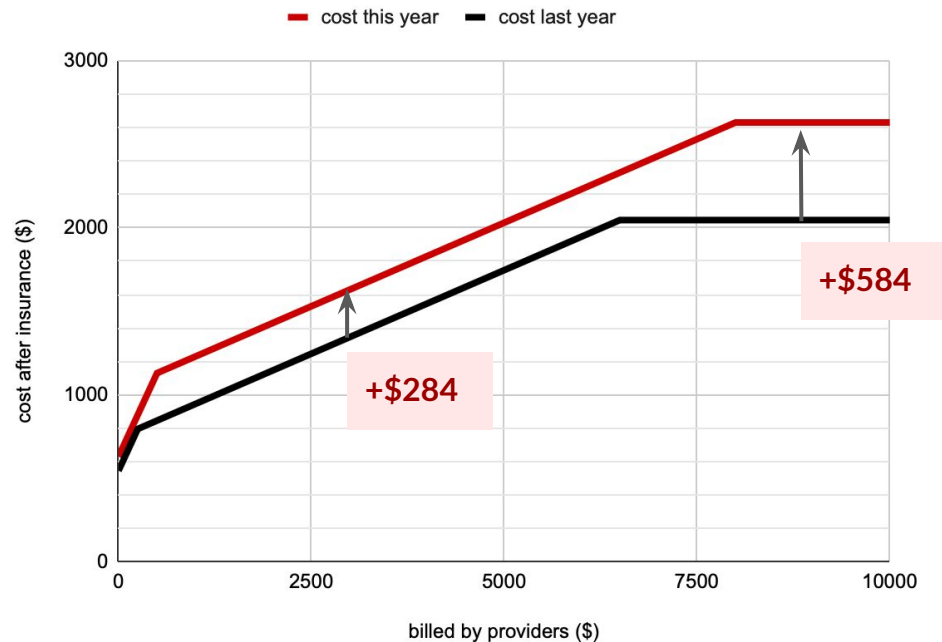
co-pay: Flat rate you pay every time you see a doctor

Out-of-Pocket Costs (cont.)



Warning: Increased Out-of-Pocket Costs!

	Last Year	This Year
In-network deductible	\$250	\$500
Out-of-network deductible	\$500	\$1000
In-network OoPM	\$1500	\$2000
Out-of-network OoPM	\$5000	\$5500



*graph for in-network only

Caltech for Affordable Healthcare (CAH)

- Formed on April 2nd, when, after no vote or consultation with the graduate student population, the Faculty's Standing Health Committee (FSHC) recommended cuts to the graduate student health plan to the Provost
- Initiated by Socialists of Caltech and is now an autonomous campaign of the GSC Health Subcommittee
- Organizes to secure a health insurance plan that works for *all* students, and particularly those who are chronically ill, disabled, or otherwise have health needs.



See: <https://caltechgradhealth.com> to read Caltech students' experiences with Caltech health insurance, and read the CAH petition at https://caltechgradhealth.files.wordpress.com/2020/08/caltech_prioritize_our_health.pdf

Caltech for Affordable Healthcare (CAH) Petition

Prioritize our Health

1. **Select a plan that doesn't cut benefits** in any of the following ways:
 - a. increase deductibles, co-payments, out-of-pocket maximums, or co-insurance
 - b. Decrease the number of covered mental health visits with waived co-pays
 - c. Reduce covered services or benefits in any other way
2. **Pay the entire cost of any resulting premium increase**
3. **Increase the Dependent Health Care Supplement** to absorb the entire premium increase

Ensure Transparency and Representation

1. Before the Faculty's Standing Health Committee (FSHC) convenes, **inform the student body of proposed policy changes and bids from alternative insurance companies and open a comment period.**
2. **Require that a majority of the FSHC vote to approve** decisions about the student health plan
3. Submit the recommendation of the FSHC **to the newly-formed GSC Healthcare Committee for approval by a vote** before it is presented to the administration
4. **Publicize** relevant FSHC **meeting minutes and recommendations** among the grad student body
5. Provide the FSHC with a **cost study** of any healthcare changes to both Institute and graduate student finances before it makes a recommendation

Special Cases

Special Case: Physician Office Visit

- In-network physician visits have a special set of out-of-pocket costs

Co-insurance	Co-pay	Deductible	OoPM
100%	\$15	Co-pay does NOT count towards the deductible	Co-pay DOES count towards the OoPM

The Faculty Health Committee recommended increasing this co-pay to \$25, but student advocacy kept it at \$15!

- Bottom line: **An in-network physician visit costs you \$15 total**, but this doesn't count towards the deductible.
- Out-of-network physician visits follow the usual rules: 60% co-insurance which does apply to the \$1000 out-of-network deductible

Special Case: Mental Health Office Visits

- In-network mental health visits have a special set of out-of-pocket costs

Co-insurance	Co-pay	Deductible	OoPM
100%	\$0 for the first 25 visits, then \$15	Co-pay does NOT count towards the deductible	Co-pay DOES count towards the OoPM

There was a proposal by HR to cut the number of no-co-pay visits to 12 per year, but student advocacy kept it to 25!

- Bottom line: **The first 25 mental health visits are free, subsequent visits cost a total of \$15 each.**
- Out-of-network mental health visits follow the usual rules: 60% co-insurance which does apply to the \$1000 out-of-network deductible

Special Case: Preventative Care Services

- Preventive care services have a special set of out-of-pocket costs

Co-insurance	Co-pay	Deductible	OoPM
100%	\$0	No impact (no cost)	No impact (no cost)

- Bottom line: **Preventive care services have no out-of-pocket costs at all.**
- See the full [list of what counts as preventive care here](#):
 - many vaccines, including the flu shot
 - HIV screening
 - Preventive reproductive health screenings/check-ups for women
 - Blood pressure screening
 - Alcohol misuse screening and counseling

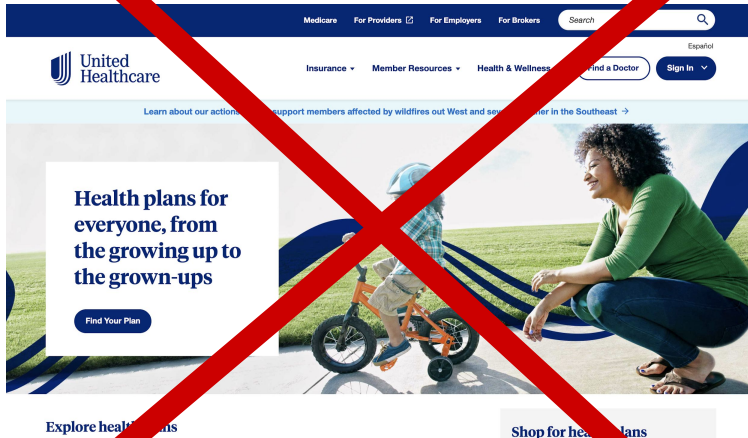
Other Special Cases: Check the Schedule of Benefits

- Check the full Schedule of Benefits to be sure
- List of other special cases:
 - Medical emergency expenses
 - Out-of-network ambulance services
 - Consultant physician fees
 - Mental illness treatment
 - Outpatient services other than office visits
 - Substance use disorder treatment
 - Office visits
 - Outpatient services other than office visits
 - Acupuncture services
 - Travel immunizations
 - Walk-in clinic visits
 - Severe Mental Illness Treatment (outpatient)

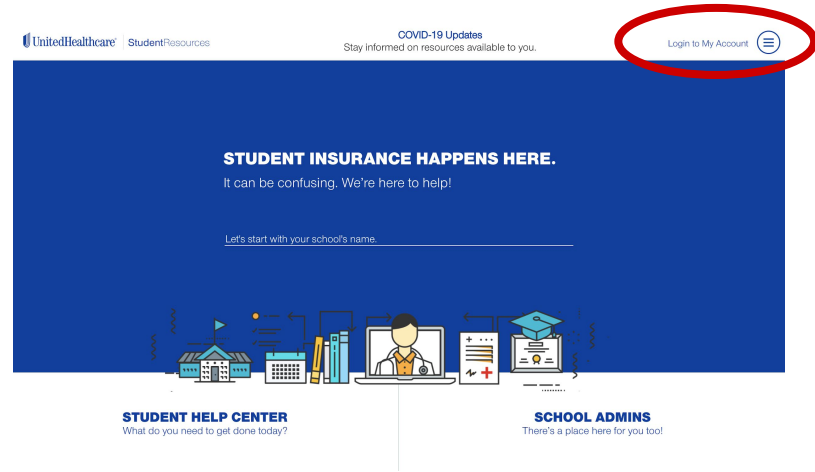
Navigating the Claims Process

United Healthcare Student Resources Web Portal

DO NOT USE the
United Healthcare website



Use the United Healthcare **Student Resources** website



<https://www.uhcsr.com/>

Member ID Card



COVID-19 Updates

SR

My Claims/Balances

- Claims Summary
Summary of pending & completed claims
- Member Balances
Deductible and Out-of-Pocket Balances
- Submit Claim
Request Reimbursement for your claims

My Benefits

Medical

Additional Benefits

Care Options

- Find Medical Provider/Estimate Cost
Locate a Healthcare Provider
- Find Mental Health Provider
Locate a Mental Healthcare Provider
- Student Health Center
Your school's Student Health Center

ID Card
Print, View, or Request ID card

Coverage Information
View coverage details

PRA
Appoint Personal Representative

Need Assistance?
How can we help you?

ID CARD INFORMATION

[Medical](#)

Name: [Redacted] Relationship: Self Policy: 2020-755-1

[View ID Card](#) [ID Card PDF](#) [Mail ID Card](#)

UnitedHealthcare
StudentResources

2020-21 Academic Year

Insured: SR ID #: 8564284 Policy #: (80840): 2020-755-1
Group Name: California Institute of Technology

For Members: 1-888-231-5640 For Providers: 1-888-224-4875

Virtual Visits: Medical/Mental Health
1-855-870-5859 uhchealthstudents.com
24/7 SAP: Counseling Services 1-877-862-1172

MultiPlan
UnitedHealthcare Choice Plus

Rx Bin: 810279
Rx PCN: 9999
Rx Group: UHCSTAC01

ID1:205 Underwritten by UnitedHealthcare Insurance Company

CLAIMS INSTRUCTIONS

Submit claims to the company within 90 days or as required by state law after the date of service. Mail all medical bills along with the insured student's name, patient's name, SR ID number, address, and group name to the address listed below.

Send claims to: For emergencies while traveling call:
StudentResources UnitedHealthcare Global
P.O. Box 809025 1-877-461-2273 (Toll-free) or 1-410-453-6330
Dallas, TX 75380-9025 Electronic Payer ID#: 74227 for 837's
or email: assistance@uhcglobal.com ID#: 355751
STDTNT for 270-271 and 276-277

For Hospital pre-admission notification call UnitedHealthcare at 1-877-295-0720.

NOTICE TO ALL HEALTHCARE PROVIDERS

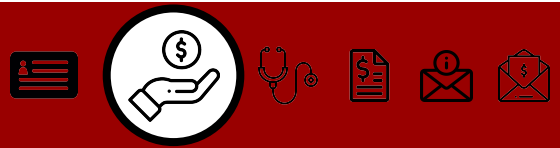
This card is not a guarantee of coverage. For information concerning coverage, co-payment and claims instructions, please call Customer Service at the number listed on the front of this card.

www.uhcst.com

19-0201

Bring this card to your doctor's appointment or pharmacy!

Co-pays



- Some types of services in our plan have co-pays - notably physician office visits
- The co-pay is typically \$15
- **You might have to pay this up front** before they let you into the appointment, so bring a form of payment with you!
- Generally, in the Caltech Student Health Insurance plan, services with co-pays aren't subject to the deductible, which means the co-pay won't count towards the deductible.
- The co-pay will count towards the out of pocket maximum.

Checking if a Provider is In-Network



COVID-19 Updates

SR ID: 6564284

My Claims/Balances

- Claims Summary**
Summary of pending & completed claims
- Member Balances**
Deductible and Out-of-Pocket Balances
- Submit Claim**
Request Reimbursement for your claims

ID Card

Print, View, or Request ID card

Coverage Information

View coverage details

PRA

Appoint Personal Representative

Need Assistance?

My Benefits

- Medical**
- Additional Benefits**

Care Options

- Find Medical Provider/Estimate Cost**
Locate a Healthcare Provider
- Find Mental Health Provider**
Locate a Mental Healthcare Provider
- Student Health Center**
Your school's Student Health Center

UNITEDHEALTHCARE CHOICE PLUS

ENGLISH

United Healthcare

FIND CARE

SAVED

With the spread of COVID-19, please call your provider's office before you go to confirm their availability, location, service options—including telemedicine—and any precautions you should take.

James Shen, MD
Hematology, Medical Oncology,
Hematology / Oncology

IN-NETWORK

SAVE (626) 396-2900

OVERVIEW SERVICES & COSTS LOCATIONS ENROLLMENT INFORMATION

209 Fair Oaks Ave
South Pasadena, CA
91030

1.7 Miles Away

View Hours OPEN NOW

Phone
(626) 396-2900 PHONE

Website
HTTP://CITYOFHOPE....

Accessibility
Bathrooms
Parking
Exterior Building

Not Evaluated For
Premium Care

Accepting All
Patients

Provider ID
00006456860 004

Checking the Coverage Policy



SR COVID-19 Updates

SR ID: 6564284

My Claims/Balances

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View assistance resources

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Locate a Mental Healthcare Provider
- Student Health Center**
Your school's Student Health Center

SR COVID-19 Updates

Stay informed on resources available to you. SR ID: 6564284

Select Policy
California Institute of Technology # 2020-755-
1

Purchase Additional Coverage

Medical Tax Documents History View Receipt ID Card

CURRENT MEDICAL COVERAGES

Summary Brochure **Brochure Certificate**

Primary - [Redacted]

SR ID 6564284	Policy 2020-755-1	Client Name California Institute of Technology
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Confirmation of Coverage

Coverage	09/01/2020 - 08/31/2021	Coverage Type	Student	Plan Info	Medical - Student Plan
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Checking the Coverage Policy cntd.



- Once you open the Brochure Certificate, check the **Schedule of Benefits** (appendix at the end of the document)

Other	Preferred Provider	Out-of-Network Provider
Consultant Physician Fees	\$15 Copay per visit 80% of Preferred Allowance not subject to Deductible	60% of Usual and Customary Charges after Deductible
Dental Treatment Benefits paid on Injury to Natural Teeth or as specifically provided in the Certificate only.	80% of Preferred Allowance after Deductible	80% of Usual and Customary Charges
Mental Illness Treatment See also Benefits for Severe Mental Illnesses and Serious Emotional	Inpatient: 80% of Preferred Allowance after Deductible	Inpatient: 60% of Usual and Customary Charges

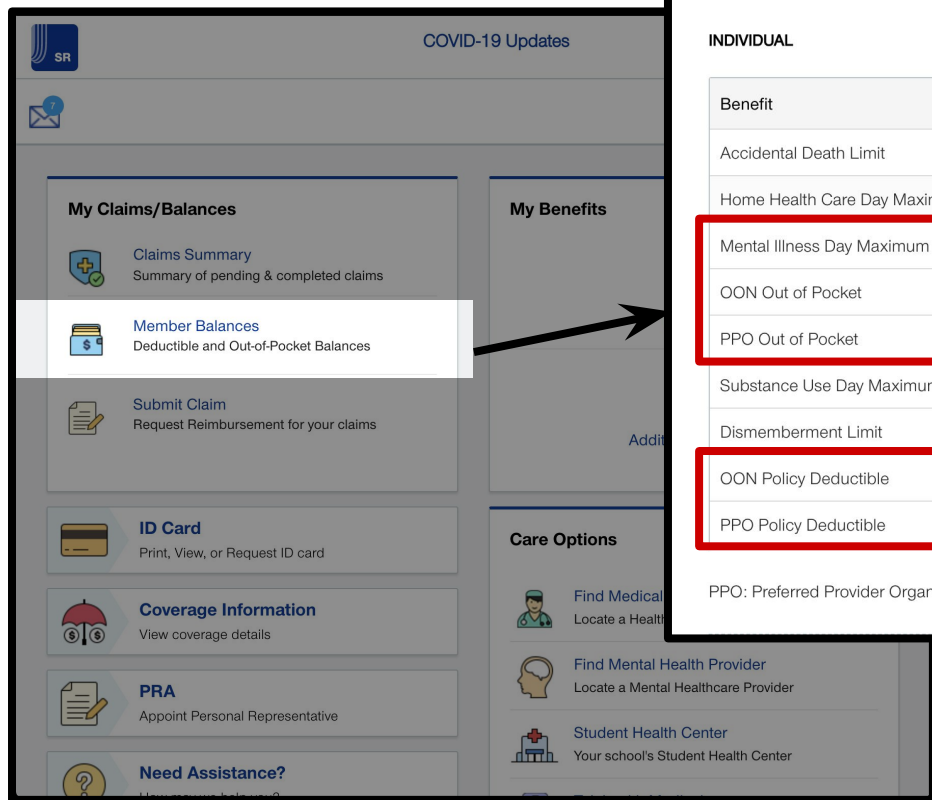
Example 1: in-network consulting physician fees **does NOT** follow the standard pattern.

- \$15 co-pay
- AND 80% coinsurance
- Is neither subject to nor counts towards deductible

Example 2: dental treatment for injury to teeth **does** follow the standard pattern

- 80% coinsurance
- Subject to and counts towards the deductible

Checking Deductible and OoPM Status



INDIVIDUAL

Benefit	Amount	Amount Applied	Balance
Accidental Death Limit	\$10,000.00	\$0.00	\$10,000.00
Home Health Care Day Maximum	100	0	100
Mental Illness Day Maximum	25	0	25
OON Out of Pocket	\$5,500.00	\$0.00	\$5,500.00
PPO Out of Pocket	\$2,000.00	\$20.00	\$1,980.00
Substance Use Day Maximum	25	0	25
Dismemberment Limit	\$10,000.00	\$0.00	\$10,000.00
OON Policy Deductible	\$1,000.00	\$0.00	\$1,000.00
PPO Policy Deductible	\$500.00	\$0.00	\$500.00

PPO: Preferred Provider Organization | OON: Out of Network

OON = Out-of-Network
PPO = In-Network

Explanation of Benefits



COVID-19 Updates

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Student Health Center
Your school's Student Health Center

Patient	Provider	Date Of Service
	City Of Hope Medical Foundation	12/06/2019
Status	Claimed	Paid
Processed	\$13,817.69	\$12,445.86

More Options ▾

[View Explanation of Benefits](#)

[Submit an Appeal](#)

[Ask Us a Question](#)

UnitedHealthcare Insurance Company
PO BOX 809025
DALLAS, TX 75380

Questions?
Please contact Customer Service at
(800) 767-0700

20200124009 COPY

CHECK NO.	CHECK DATE	CHECK AMOUNT
9179374	01/24/20	\$12,445.86

CLAIM #: 19317029-01-01-007
POLICY #: 19-0755-01
APPEALS STATE CA
ID NUMBER: 6564284
SCHOOL ID: 2048995
INSURED: [REDACTED]
PATIENT: [REDACTED]
PATIENT ACCT. #: F1018323490
PAYEE: CITY OF HOPE MEDICAL FOUNDATI
ADDRESS: PO BOX 512165
LOS ANGELES CA 90051-0185

BILLING NPI: 1671866366
PROVIDER: CITY OF HOPE MEDICAL FOUNDATIO
PROVIDER NPI: 1063792265

EXPLANATION OF BENEFITS - This is NOT a Bill

Ref #	Service	Dates of Service From To	Proc Code	Amount Claimed	Ineligible	Discount	Total Covered	Co-Pay	Policy Deductible	Total Benefits	Patient Balance	Remark Code
TESTS/PROC		12/06/19-12/08	J3358	13548.60			13548.60		215.86	12222.74	1325.86	
TESTS/PROC		12/06/19-12/08	96365	269.09		45.97				223.12		
Totals:				13817.69		45.97	13771.72		215.86	12445.86	1325.86	

Remarks:

Example: Reading an EoB



EXPLANATION OF BENEFITS - This is NOT a Bill Payment

Ref #	Service	Dates of Service From To	Proc Code	Amount Claimed	Ineligible	Discount	Total Covered	Co-Pay	Policy Deductible	Total Benefits	Patient Balance	Remark Code
	TESTS/PROC	12/06/19-12/06	J3358	13548.60			13548.60		215.86	12222.74	1325.86	
	TESTS/PROC	12/06/19-12/06	96365	269.09		45.97	223.12			223.12		
Totals:				13817.69		45.97	13771.72		215.86	12445.86	1325.86	

Remarks:

1

2

4

- This was last year, our deductible was \$250 and our OoPM was \$1500.
- In this example, I had already spent some money and had other claims:
 - I had spent \$34.14 that counted towards my deductible.
 - I had spent \$174.14 that counted towards my OoPM.

1. The medication is covered by the plan, so the total covered is the total cost of the medication.
2. $\$250 - \$34.14 = \$215.86$ is applied to the deductible (the insurance covers 0% of this amount)
3. An 80% coinsurance is applied to the remaining amount, leaving $0.2 * (\$13548.60 - \$215.86) = \$2666.55$ for me to pay
4. But, after the first $\$1500 - \$174.14 = \$1325.86$, I have already hit my out of pocket max. I only have to pay \$1325.86.

Example: Reading an EoB cntd.



EXPLANATION OF BENEFITS - This is NOT a Bill Payment

Ref #	Service	Dates of Service From To	Proc Code	Amount Claimed	Ineligible	Discount	Total Covered	Co-Pay	Policy Deductible	Total Benefits	Patient Balance	Remark Code
	TESTS/PROC	12/06/19-12/06	J3358	13548.60			13548.60		215.86	12222.74	1325.86	
	TESTS/PROC	12/06/19-12/06	96365	269.09		45.97	223.12			223.12		
Totals:				13817.69		45.97	13771.72		215.86	12445.86	1325.86	

Remarks:

IV infusion

1

2

3

4

- After the first part of the claim, I have to update my deductible and out of pocket max
 - I had spent \$250 that counted towards my deductible.
 - I had spent \$1500 that counted towards my OoPM.
- These were the full amounts for last year's plan

- A discount is applied to a procedure done in-network.
- The procedure is covered by the plan, so the cost after the discount $\$269.09 - \$45.97 = \$223.12$ is the total covered.
- I have already reached my deductible for the year, so none of this cost is applied to the deductible.
- I have already reached my out of pocket maximum, so I am not responsible for any of the coinsurance. The total I have to pay is \$0. (If I hadn't reached the OoPM I would have had to pay the co-insurance of $0.2 * \$223.12 = \44.62)

Final Bill



Amount Due		Due Date	Guarantor #
\$1,340.86		03/07/20	443820

Accounts		Charges	Pmts/Adjs	Patient Balance
Date	Description			
Physician Statement - James Yu Shen, MD MRN: 11021435				
Date of Service: Dec 06, 2019		visit to SPAS INFUSION Account Number: 8000675307		
Dec 06, 2019	Ustekinumab, iv inject, 1 mg (57894-054-27) (qty: 390)	13,548.60		
Dec 06, 2019	IV INFUSION, THERAP/PROPH/DIAGNOST,INITIAL,1ST HOUR	269.09		
Jan 31, 2020	Generic Commercial Payor Payments		12,445.86	
Jan 31, 2020	Generic Commercial Payor Adjustments		45.97	
Your Responsibility				\$1,325.86
Physician Statement - James Yu Shen, MD MRN: 11021435				
Date of Service: Nov 27, 2019		visit to SPAS HEMATOLOGY ONCOLOGY Account Number: 8000686764		
Nov 27, 2019	OFFICE OUTPATIENT VISIT	167.00		
Jan 09, 2020	Generic Commercial Payor Payments		152.00	
Your Responsibility				\$15.00

- The final bill will come from the healthcare provider (eg the doctor's office) not the insurance company
- This requires action! If you don't pay them, they will sell your debt to a debt collector who will start harassing you.

Total cost of services

Amount paid by insurance company = "total benefits" on the EoB

Discount for in-network services

Prescription Drugs

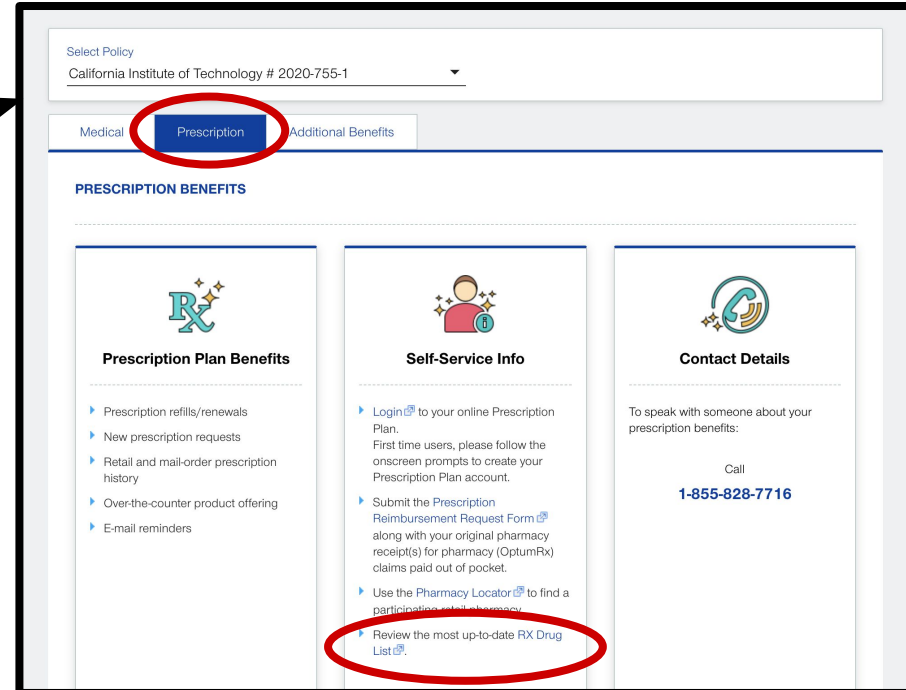
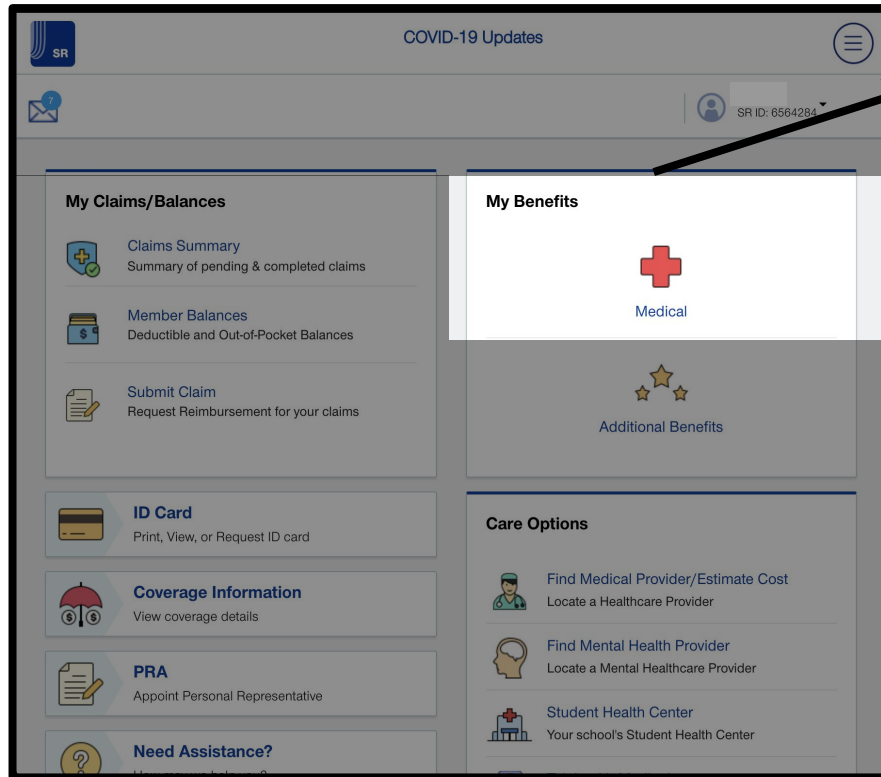
Prescription Drugs

- Prescription drugs are sorted into **three tiers**, and prices after insurance are a flat rate by tier


	In-network pharmacy	Mail-order
Tier 1	\$10 per 31 days	\$20 per 90 days
Tier 2	\$30 per 31 days	\$60 per 90 days
Tier 3	\$50 per 31 days	\$100 per 90 days

- Sometimes there are additional requirements
 - Prior authorization (you must make a case to the insurer that you need the drug)
 - Supply limit (largest amount of medication the insurer will cover in a certain period of time)
- The deductible doesn't apply to prescription drugs, and prescription drugs don't count towards the deductible
- Some prescriptions that need special handling must be ordered through the specialty pharmacy. The name of the specialty pharmacy that works with UHCSR is [Optum RX](#)

Accessing the Prescription Drug List (PDL)



Reading the Prescription Drug List



Prescription Drug Name	Drug Tier	Coverage Requirements & Limits
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 7.5 MG/0.15ML (<i>methotrexate (anti-rheumatic)</i>)	2	SL (0.6 ml (4 auto-injectors) per month)
RIDAURA ORAL CAPSULE 3 MG (<i>auranofin</i>)	3	SP
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG (<i>upadacitinib</i>)	2	PA; SL (1 tablet per day); SP
SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG (<i>cyclosporine</i>)	3	
SANDIMMUNE ORAL SOLUTION 100 MG/ML (<i>cyclosporine</i>)	3	
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML (<i>golimumab</i>)	2	PA; SL (1 syringe per 21 days); SP
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML (<i>golimumab</i>)	2	PA; SL (0.5 ml (1 syringe) per month); SP
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED	2	PA; SL (1 syringe per 21 days); SP

PA = prior authorization

SL = supply limit

SP = specialty medication

Prior Authorization

- Some medications require prior authorization
 - you, your doctor, or your pharmacist needs to submit a request to the insurance company before you purchase the medication
 - The insurance company will check against a list of internal criteria whether the drug is “medically necessary” for your situation.
 - [prior authorization criteria here](#)
- You can buy the medication at full price and submit a claim later, but the insurance may not cover it or may not cover it completely. (risky)
- Your doctor’s office can usually do this process, and we highly recommend you work with them rather than submitting a request yourself.

Prior Authorization

C. Crohn's Disease (CD)

1. Initial Authorization for Maintenance Dosing

a. Stelara 90 mg/1 mL will be approved based on all of the following criteria:

(1) Diagnosis of moderately to severely active Crohn's disease

diagnosis

-AND-

(2) One of the following:

(a) History of failure to one of the following conventional therapies at maximally indicated doses within the last 3 months, unless contraindicated or clinically significant adverse effects are experienced (document drug, date, and duration of trial):

- i. Corticosteroids (e.g., prednisone, methylprednisolone, budesonide)
- ii. 6-mercaptopurine (Purinethol)
- iii. Azathioprine (Imuran)
- iv. Methotrexate (Rheumatrex, Trexall)

must try
another drug
first ...

... or you're already
taking the drug

not taking certain
other drugs

-OR-

(b) Both of the following:

i. Patient is currently on Stelara therapy as documented by claims history or medical records (Document drug, date, and duration of therapy):

-AND-

ii. Patient has not received a manufacturer supplied sample at no cost in the prescriber's office, or any form of assistance from the Janssen sponsored CarePath Savings program (e.g., sample card which can be redeemed at a pharmacy for a free supply of medication) as a means to establish as a current user of Stelara*

-AND-

(3) Patient is not receiving Stelara in combination with any of the following:

- (a) Biologic DMARD [e.g., Remicade/Inflectra (infliximab), Humira (adalimumab), Cimzia (certolizumab), Simponi (golimumab)]
- (b) Janus Kinase Inhibitor [e.g., Xeljanz (tofacitinib), Olumiant (baricitinib)]

-AND-

(4) Prescribed by or in consultation with a gastroenterologist

* Patients requesting initial authorization who were established on Stelara therapy via the receipt of a manufacturer supplied sample at no cost in the prescriber's office, or any form of assistance from the Janssen sponsored CarePath Savings program, must meet the initial authorization criteria as if patient were new to therapy

type of prescribing
doctor

Authorization will be issued for 12 months.

Problems with Prior Authorization

- Prior authorization is a tactic that insurance companies use to get out of covering expensive drugs by putting up administrative hurdles
- We know this is a problem for Caltech students. From an informal survey:
 - At least 5 people have had a prior authorization request denied
 - At least 10 people have experienced a delay in care while a prior authorization request was processed
- It is important to start the process as soon as possible.
- **If a request is denied, you can and should appeal it** and submit new documentation. Ask your doctor's office for help.

COVID-Specific Issues

COVID Testing

- Caltech provides **COVID-19 testing through Student Wellness Services at no cost to the individual** to any member of the community (including graduate students) *who is eligible*
- **You are eligible if:**
 - You are experiencing COVID-like symptoms
 - You have been identified as a close contact of an ill person
 - You have been exposed to a confirmed case of COVID-19
 - You have participated in activities that present an elevated risk for exposure
- If you are not eligible, you may be referred to testing through a primary care provider or another testing resource in the community
- **It is possible to get a free test as an asymptomatic person:**
 - UHCSR is covering the full cost of testing if you are referred by a healthcare professional
 - UrgentMED on Lake & California is doing COVID-19 testing for asymptomatic people (will be covered by UHCSR, so free to you)
 - Dodger Stadium testing is free, quick & you don't have to be symptomatic
 - Also check [this link](#)—it may or may not be free depending on where you go
- Read the [GSC COVID-19 Response Committee's 40 page report](#) on Caltech's policies

Telehealth

- **Caltech Counseling** is doing all appointments remotely
 - Includes occupational therapy & psychiatry
 - By telephone or by encrypted, HIPAA-compliant Zoom video platform
- **Health Services** is doing appointments remotely when possible
 - By telephone
- Other online resources:
 - Students with Caltech UnitedHealthcare insurance can also access free telehealth services 24/7 via [HealthiestYou](#)
 - LA County is offering its residents access to [Headspace](#) for free through 2020
 - Caltech is offering free access to [SilverCloud Health](#) (online, self-guided cognitive behavioral therapy) to all students

*Student Wellness Services can only provide most services to students who are living in California due to licensing requirements

Healthcare Across State Lines

- If you are living in a different state during COVID-19, many health & counseling services can only be provided by somebody licensed in that state
- **Services you can only access if you are living in California:**
 - Teletherapy, psychiatry, and occupational therapy through Caltech Counseling
 - Health services at Student Wellness Services
 - Prescription refills (with some exceptions for urgent, one-time refills)
- **Services you can access if you are living in any state:**
 - An initial appointment with Caltech Counseling via teletherapy
 - Recommendations to local providers
 - Access to crisis services

See a full list [here](#)

Additional Resources

Student Emergency Fund

- \$40-50k in the fund per year, obtained through donations
- For both undergrads and grads
- Fill out a form online and cases will be reviewed by undergrad deans or grad office on a case by case basis
- Cannot be used for students' partners, family members, or dependents
- Can provide financial assistance to students who experience emergencies including:
 - **medical or dental expenses not otherwise covered by insurance**
 - travel to the funeral of a family member; travel for urgent family matter
 - sudden loss of income or a housing emergency
 - loss due to theft or fire
 - recovery from a recent illness or accident
- We know some things about grad emergency fund process. Not sure if it applies to undergrads:
 - Fund sometimes **does not cover the full cost of uncovered medical/dental expenses**, has covered \$1000-\$2000 based on grad student stories
 - **There is an informal cap of \$2000 per student per year**
 - Not really designed for recurring usage (e.g chronic illness)
 - Taxable

Dependent Healthcare Supplement

- Available to grad students
- The dependent healthcare supplement is **\$140/month per dependent**, effective September 1st 2020
- It is on a reimbursement basis, and is paid by the grad office
- It requires proof of payment of medical expenses (could include the premium cost)
- Find the application form here: <https://www.gradoffice.caltech.edu/financialsupport/funding>

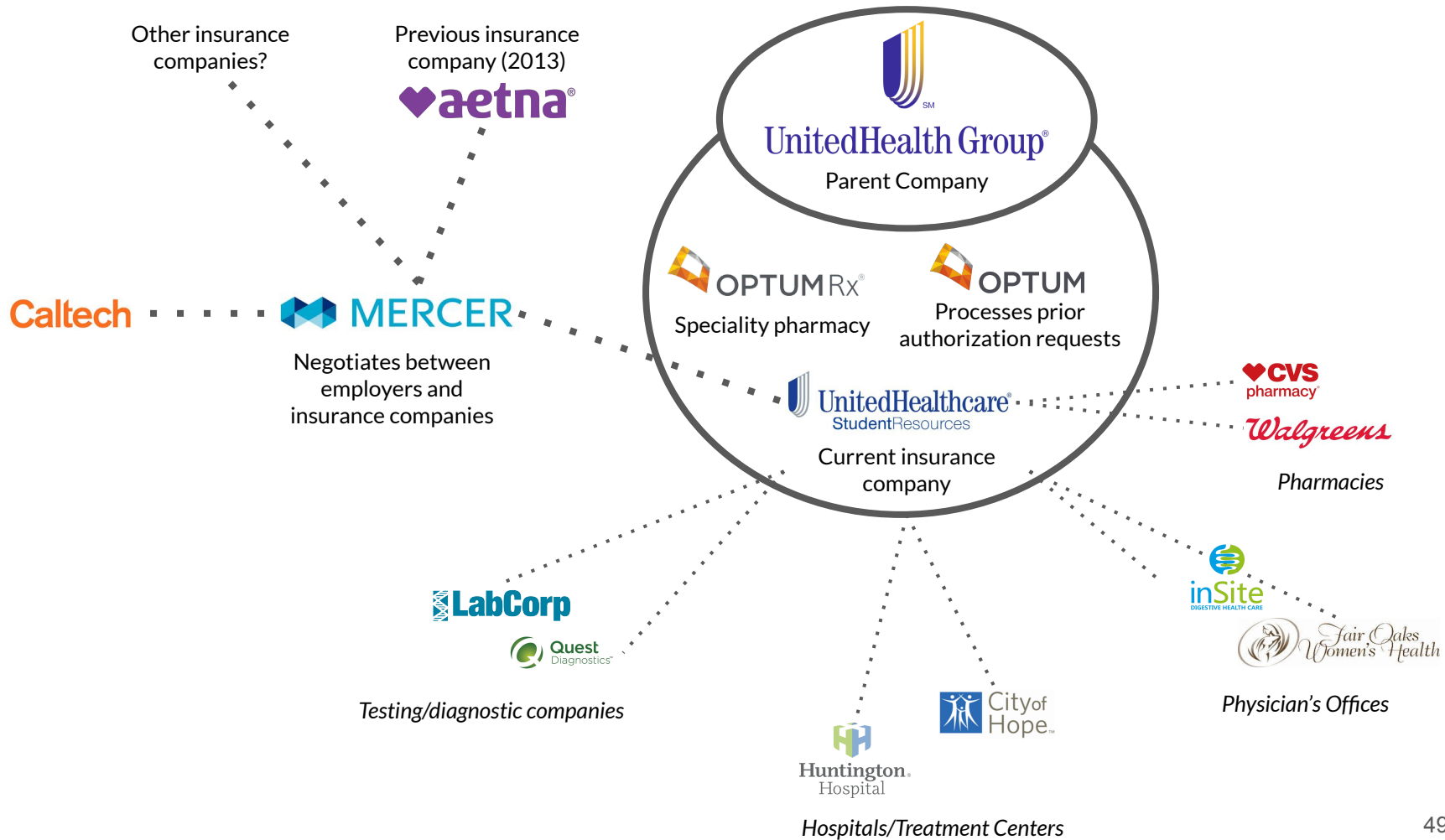
Kevin Lee

- Kevin Lee is the Human Resources Student Benefits Specialist
- You can contact him to see if your claim was processed properly



Kevin Lee
626-395-8943
kcllee@caltech.edu

Insurance Plan Selection Process



Decision-Making Timeline

Timeline for the 2019-20 Academic Year

From the Health Committee Report to the Faculty Board, April 2020

Activity	Responsibility	Timing
Initial Planning/Strategy meeting	Caltech / Mercer	January
Execute strategy (negotiate renewal or refresh bids)	Mercer	February
Present renewal to Caltech	Caltech / Mercer	February
Convene Faculty's Health Committee	Caltech	March
Caltech to decide on final plan design and rates (subsidy)	Caltech / Mercer	March-April
Present recommendation to Caltech Leadership	Caltech	April
Confirm renewal with UHCSR (if applicable)	Mercer	End of April
Open Enrollment	Caltech	July



Faculty's Standing Health Committee

- **What we know about the 2020-21 Academic Year:**
 - FSHC composition:
 - Faculty: Henry Lester, Jesse Beauchamp, Sunil Golwala, Andrew Ingersoll, Catherine Jurca
 - Admin: David Chan, Leslie Nye, Jennifer Howes, Betsy Mitchell
 - Chief Human Resources Officer: Julia McCallin
 - Undergrad rep: Elaine Lin
 - Grad reps: Jane Panangaden, Ashay Patel
 - Recommendations were made without a vote last year
 - UHCSR has already placed a bid (9% premium increase), withdrawn it, and placed another bid (18% premium increase)
- **What we don't know:**
 - A lot!

It is really important that we bring your ideas and preferences to the table to effectively advocate - in addition to applying grassroots pressure

The Plan for 2020-2021

More healthcare cuts are not only possible, **they are very likely!**

Make your voice heard:

We need you to give us feedback on what you want out of the health insurance plan

Make Your Voice Heard: Caltech for Affordable Healthcare

- Caltech for Affordable Healthcare (CAH) formed in response to the proposed cuts to the student health plan last year. *Our petition, signed by over 40% of the graduate population and 24 student groups, demanded no cuts to our benefits and increased transparency in the healthcare decision making-process.* While some of our demands were met, many were ignored. However, our continued struggle to ensure that *all* members of our community have access to high quality, affordable health insurance continues.
- If you're interested in being a part of our work, **drop your email in the chat** and **join us at our next meeting, this Friday, October 16th at 11 am**
- Open to grads, undergrads, and postdocs!



For more info, check out our website www.caltechgradhealth.com
Like us on Facebook [@CaltechCAH](#)
Follow us on Twitter [@CAHgrads](#)



Caltech Disability Coalition

- Welcomes **all** students, staff, and faculty regardless of disability status.
- Aims to:
 - **Educate the Caltech community** about disability identity and culture
 - **Foster a sense of community** amongst disabled and/or chronically ill community members on Caltech campus
 - **Advocate for the interests** of disabled and/or chronically ill community members on Caltech campus
 - **Increase representation of disability** in STEM and on campus

For more info, contact DisabilityCo@caltech.edu

Or [join our mailing list](#)



Q&A

Useful Links

- California plan marketplace: <https://www.coveredca.com>
- [Caltech waiver requirements](#)
- UHCSR portal: <https://www.uhcsr.com/>
- [List of federally mandated preventive care services](#)
- [Prior authorization criteria](#)