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## 2016 Student Benefits Guide

Welcome to your new electronic benefits guide.

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Use Adobe Acrobat Reader (mobile app or software) for interactive viewing.



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BENEFITS	WEBSITE/EMAIL	PHONE
Health	United Healthcare (UHC) Student Resources <a href="https://www.uhcsr.com/mmc">https://www.uhcsr.com/mmc</a>	Customer Service <a href="tel:800-767-0700">800-767-0700</a>
Vision	United Healthcare Vision <a href="http://www.myuhcvision.com">http://www.myuhcvision.com</a>	Vision Customer Service <a href="tel:800-638-3120">800-638-3120</a> Vision provider locator <a href="tel:800-839-3242">800-839-3242</a>
Dental	Delta Dental of TN <a href="http://www.deltadentalTN.com">www.deltadentalTN.com</a>	<a href="tel:800-223-3104">800-223-3104</a>
Life & Disability	American Medical Association	Contact Student Life
Needle Stick	UHC participants	<a href="tel:800-767-0700">800-767-0700</a>
	Star Underwriter (non UHC participants)	Located on ID card
Student Assistance	New Directions <a href="http://www.ndbh.com">www.ndbh.com</a>	<a href="tel:800.624.5544">800.624.5544</a> or <a href="tel:816.237.2352">816.237.2352</a>
<b>MEHARRY Links</b>		
Student Insurance	<a href="http://www.mmc.edu/prospectivestudents/student_insurance/index.html">http://www.mmc.edu/prospectivestudents/student_insurance/index.html</a>	
Health Services	<a href="http://www.mmc.edu/prospectivestudents/student-services/student-health-svcs.html">www.mmc.edu/prospectivestudents/student-services/student-health-svcs.html</a>	
Counseling	<a href="http://www.mmc.edu/prospectivestudents/student-services/counseling-services.html">www.mmc.edu/prospectivestudents/student-services/counseling-services.html</a>	
Nashville General	<a href="http://www.mmc.edu/patientcare/school-of-medicine/nghlanding.html">www.mmc.edu/patientcare/school-of-medicine/nghlanding.html</a>	

## PLAN, ELIGIBILITY, & ENROLLMENT QUESTIONS

Meharry Office of Student Life  
 Tammi Lavender  
 Keadra Babb  
[studentinsurance@mmc.edu](mailto:studentinsurance@mmc.edu)  
 615.327.6792

Aon Advocacy  
[AonHewittAdvocacy.com](http://AonHewittAdvocacy.com)  
 866-279-0495

## CLAIMS RESOLUTIONS & QUESTIONS

Aon Advocacy  
[AonHewittAdvocacy.com](http://AonHewittAdvocacy.com)  
 866-279-0495

# Medical Benefits

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## MEDICAL PLAN

Meharry offers students a healthcare plan through United Healthcare. Your level of benefit coverage will be determined by your provider choice.

1. **Meharry Network** Copays and deductibles waived; coinsurance applies
2. **UHC Network** Copays, deductibles, and coinsurance apply
3. **Out-of-Network** Copays, deductibles, and coinsurance apply, and the percentage of costs covered is reduced

2016-2017 Student Insurance Fees	
Student Only	\$3366.84
Student + Spouse	\$6708.80
Student + Child	\$6822.08
Student + Children	\$9858.08
Family	\$13208.24

Fees include medical, dental, & vision coverage.

*There is only one open enrollment/waiver period for student insurance. If you are on the student insurance plan for the fall semester and continue as a student for the spring semester, you cannot waive coverage for the spring semester.*

## Medical Networks 1,2, 3

**Use in-network health care providers for the best benefit.** Network providers apply a network discount and file your claims for you. If you choose out-of-network providers, you will be responsible for a higher deductible and a larger percentage of the charges, plus any amount the provider charges over the United Healthcare maximum allowable charge.

1. **Meharry Network** all of Meharry clinics and Nashville General
2. **UHC Network** Includes Vanderbilt, St. Thomas and HCA TriStar hospitals and providers
3. **Out-of-Network** providers you choose that are not part of Meharry or UHC networks

## Summary Notice

This is just a summary. For complete information, including plan limitations and exclusions, please see your plan documents.

## Go Online to Get Your ID Cards

Print or order your ID cards at:

**UHC** - <https://www.uhcsr.com/mmc>  
(or access it online via UHC smart phone app; see UHC Resources page for details).

**Delta Dental** - [www.deltadentalTN.com](http://www.deltadentalTN.com)

**UHC Vision** - <http://www.myuhcvision.com>



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	IN NETWORK		OUT-of-NETWORK
	<b>Network option 1</b> <b>Meharry Provider</b> No copays, deductible waived	<b>Network option 2</b> <b>UHC Choice Plus Network</b> Copays and deductible apply	<b>Network option 3</b> <b>Out-of-Network</b> Copays and deductible apply, less coverage
Preventive Care	Covered 100%	Covered 100%	Covered 100%
Office Visits/Specialist	No copay; covered 100%	\$10/\$20 copay	Deductible, then 40%
Deductible Ind/Family	Deductible waived	\$250/\$500	\$500/\$1000
Coinsurance	Deductible waived; you pay 20%	20% after deductible	40% after deductible
Out-of-Pocket Max Ind/Family	\$1,000/\$2,000	\$1,000/\$2,000	\$2,500/\$7,900
Rx Drugs Tier 1/Tier 2/ Tier 3	\$7/\$25/\$50	\$7/\$25/\$50	Not covered
Mail order	2 x retail copay	2 x retail copay	Not covered
Inpatient Hospital	Deductible waived; you pay 20%	20% after deductible	40% after deductible
Outpatient Facility	Deductible waived; you pay 20%	20% after deductible	40% after deductible
Urgent Care	No copay; covered 100%	\$20 copay	40% after deductible
Emergency Room	No copay; covered 100%	\$100 copay	40% after deductible
Mental Health Substance Abuse			
Inpatient	Deductible waived; you pay 20%	20% after deductible unlimited	40% after deductible unlimited
Outpatient	No copay; covered 100%	\$10 copay	40% after deductible unlimited
Lifetime Max Benefit	unlimited	unlimited	unlimited
Pediatric Vision	One preventive exam per year	One preventive exam per year	Not covered

Deductible and Out-of-Pocket maximums accumulate from July 1, 2016 to June 30, 2017



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## UHC STUDENT WEBSITE, APP, DISCOUNTS

### UHC Student Resources Meharry Page

[www.uhcsr.com/mmc](http://www.uhcsr.com/mmc)

### UHC Mobile App

Find the UHC mobile app in the Google Android Market and Apple App Store .

- View Digital ID card
- View Claims
- Find UHC doctors & providers



Google

<https://play.google.com/store/apps/details?id=com.laser2mail.uhcsrmobile>

iTunes

<https://itunes.apple.com/us/app/uhc-studentresources/id740854874?mt=8>



### UHC Student Assistance Program

Telephonic 24hr access to the following resources:

- 24hr Nurseline
- Financial & legal counseling
- Mental health counseling

[877-643-5130](tel:877-643-5130)

### UHC HealthAllies Discount Program

- Gym memberships
- Lasik vision correction
- Teeth whitening
- Weight management – NutriSystem & Jenny Craig
- Sports apparel & equipment

<http://www.sr.unitedhealthallies.com/>

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## NEEDLE STICK PLAN AND PROCEDURES

As members of our medical community, Meharry provides needle stick coverage to all clinical students. You are enrolled in the mandatory pathogen exposure/accident coverage which provides a benefit in case you are exposed to blood or other body fluids through a needle stick or body fluid splash/spill event.

### For Students Who Elected the Medical Plan

Covered 100% - Use your UHC medical plan ID card.

In the event of a needle stick

- Seek treatment from a MMC or UHC participating provider
- No charge for medical services at point of service
- If prescriptions are needed, you will pay applicable copayment and receive reimbursement from UHC
- Must use UHC participating pharmacy

### For Students Who Declined the Medical Plan

Covered 100% - You will be sent an ID card just for this coverage.

- Will be sent an ID card from Star Underwriter
- Seek treatment from an MMC provider or a provider of your choice
- Notify MMC of incident
- Complete Reimbursement form for STARR
- \$12 annual fee

MAXIMUM BENEFIT	DEDUCTIBLE
\$20,000	\$0

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## DENTAL

Dental benefits are provided by Delta Dental of Tennessee. This PPO plan offers a higher level of benefit when you receive services from a participating dentist.

Participating providers will file claims for you and will accept the plan's payment in full.

Out-of-network providers may bill you for any balance that remains after Delta Dental has paid your claim.



Group #5774	PPO Dentists IN-NETWORK	Delta Premier NETWORK	OUT-of-NETWORK
SERVICE	BENEFIT		
Deductible* applies to basic and major services only	Individual \$50 Family \$150	Individual \$100 Family \$300	Individual \$100 Family \$300
Annual maximum* for non-orthodontic services	\$1,750 per person	\$1,750 per person	\$1,750 per person
Preventive services exams, cleanings, x-rays, fluorides	Covered 100% Deductible does not apply		
Basic services fillings, simple extractions, repair, endodontics, oral surgery, periodontics	Covered 80% after deductible	Covered 50% after deductible	Covered 50% after deductible
Major services crowns, bridges, dentures, implants	Covered 50% after deductible	Covered 25% after deductible	Covered 25% after deductible
Orthodontic services braces	Covered 50% up to \$1,000 lifetime No age limit	Covered 50% up to \$1,000 lifetime No age limit	Covered 50% up to \$1,000 lifetime No age limit
* Deductible and annual maximums are applied per calendar year.			



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## VISION

Vision benefits are available through United Healthcare. This PPO plan offers a higher level of benefit when you receive services from a participating provider.

Participating providers will file claims for you and will accept the plan's payment in full. Out-of-network providers may bill you for any balance that remains after the United Healthcare has paid your claim.



In-Network Vision Providers include:

- VisionWorks
- Eyecare Plus
- Plus many more!
- Find a vision provider in your area on [www.myuchvision.com](http://www.myuchvision.com)

Other low cost providers:

- Wal-Mart
- Sam's Club\*
- Costco\*
- Payment at time of service will be required and claim form submitted for In-Network reimbursement.

\*Memberships may be required to access vision department

IN-NETWORK	Group #125202	
SERVICE	BENEFIT	FREQUENCY
Eye Exam	\$10 copay	Once every 12 months
Lenses (pair) Single Bifocal Trifocal	Standard glass or plastic \$25 copay	Once every 12 months
Contact Lenses In lieu of lenses/frames	up to 6 boxes are included	Once every 12 months
Elective Conventional	100% up to a \$150 allowance	
Elective Disposable	\$150 allowance	
Medically necessary	Paid in full	
Frames	100% up to a \$150 allowance	Once every 24 months

\*Benefits are lower for Out-of-network services and are based on a reimbursement schedule

**HOW GET A VISION ID CARD:**

Register on [www.myuchvision.com](http://www.myuchvision.com)

Click – Print ID card

If you don't have an ID card you can always provide your SSN to the In Network vision provider and tell them you have UHC Vision coverage and they will verify your benefit coverage with UHC.



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## LIFE/ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE

Coverage is provided by Meharry to you through the American Medical Association.

LIFE	
Benefit	Coverage
Life Insurance	\$50,000
Repatriation	expenses incurred to transport your body to a mortuary near your primary place of residence, but not to exceed \$5,000 or 10% of the Life Insurance Benefit, whichever is less.

AD&D	
Benefit	Coverage
AD&D Insurance	equal to the amount of your life benefit amount payable for certain losses is less than 100% of the AD&D benefit
Career Adjustment	tuition expenses for training incurred by your spouse within 36 months after the date of your death, exclusive of board and room, books, fees, supplies and other expenses, not to exceed \$5,000 per year, or cumulative total of \$10,000 or 25% of AD&D benefit, whichever is less.
Child Care	total childcare expense incurred by your spouse within 36 months after the date of your death for all children under age 13, not to exceed \$5,000 per year, or cumulative total of \$10,000 or 25% of AD&D benefit, whichever is less
Higher Education	tuition expenses incurred per child within 4 years after the date of your death at an accredited institution of higher education, exclusive of board and room, books, fees, supplies and other expenses, not to exceed \$5,000 per year, or cumulative total of \$20,000 or 25% of AD&D benefit, whichever is less

Loss	Percentage Payable	No more than 100% of your AD&D Insurance will be paid for all losses resulting from one accident.
Life	100%	
One hand, one foot or sight of one eye	50%	
Two or more of the Losses listed	100%	

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## LONG-TERM DISABILITY INSURANCE

Meharry provides Long-Term Disability (LTD) coverage for you.

This coverage helps replace a portion of your income when you face a disabling illness or injury. Disability benefits are offset by any disability or retirement income from Social Security, Workers Compensation or any other insurance made available through an employer.

### Coverage Includes

- Medical & Dental students - \$1,500 monthly benefit
- Graduate Students - \$750 monthly benefit
- 90 day elimination period
- 6 month/12 month pre-existing condition
- Length of benefit – Social Security Normal Retirement Age
- \$2,000 - \$2,500 monthly benefit available during residency on guaranteed issue basis
- 24 month limit: mental & nervous disabilities and substance abuse limited to 24 months of benefits
- \$3,000 income offset
- Assisted Living Benefit (ALB)
- \$5,000 lump sum after 12 months of permanent and total disability
- 5 Year Student definition: unable to perform duties of a student in good standing
- School Loan Provision: up to \$200,000 at the end of 12 months for permanent & total disability

### IMPORTANT

If you become disabled, please contact Student Life as soon as possible to discuss your coverage and for assistance in filing your disability claim.

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## LIFE ASSISTANCE FOR STUDENTS AND FAMILIES

The Student Assistance Plan (SAP) is an important part of your benefits package. Meharry encourages you and your family members to use these free and confidential services.

Your benefit includes six in-person consultations and unlimited consultations by telephone.

Your SAP can help with:

- Substance abuse
- Family issues
- Financial planning or concerns
- Emotional and mental health issues
- Legal questions
- Stress management
- Work-life balance
- Finding child care or elder care

Your confidentiality is protected by law. No information can be released without your written consent.



AVAILABLE 24/7

1.800.624.5544 or 816.237.2352

[www.ndbh.com](http://www.ndbh.com)

Login code Meharry

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## MEDICAL

### What are the differences between the networks?

- Meharry network no copays or deductible
- UHC network copays and deductible apply
- Out-of-network lower coverage, higher costs, possible balance billing

### How do I find a network doctor or provider?

Go to <https://www.uhcsr.com/mmc> or call UHC 800.767.0700

### What providers are in the Meharry network?

Meharry Medical Group

<http://www.mmc.edu/patientcare/school-of-medicine/meharry-medical-group/index.html>

[615.327.5572](tel:615.327.5572)

Nashville General Hospital

<http://nashvillegeneral.org/>

### Who do I contact if I have claims questions?

First, call UHC. If your issue is not resolved, please contact Aon Advocacy at 866-279-0495 or [AonHewittAdvocacy.com](http://AonHewittAdvocacy.com)

### If I lose my card, how do I request a new one?

Go to <https://www.uhcsr.com/mmc>, or call Customer Service 800.638.3120

## COMMON TERMS

TERMS	DEFINITIONS
Deductible	Amount you pay before insurance pays
Copay	Amount you pay per service
Coinsurance	Percentage you pay
Network	Group of providers who agree to a precise cost structure and billing procedure

### Additional Definitions

<https://www.uhcsr.com/SelfServiceSupport/Students/HealthInsurance101/Glossary.aspx>

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## Midyear Changes to Benefits

Unless you have a qualified status change, your elections will remain in effect for the entire plan year.

Qualified status changes include:

- Marriage, divorce, legal separation
- Birth or adoption of a child
- Change in dependent status
- Death of a qualified dependent
- Change in dependent employment status

You must notify Student Life Services within 30 days of the change.

## WHCRA

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan.

## Prohibition on Rescission

Under the Patient Protection and Affordable Care Act (PPACA), a group health plan is prohibited from rescinding coverage except in three circumstances. A rescission is a retroactive termination of coverage. Coverage may be terminated retroactively only in the following circumstances:

- Failure to pay premiums
- Fraud
- Intentional misrepresentation of material fact

If coverage is to be rescinded, you must be given at least 30 days advanced written notice that coverage is being terminated retroactively.

## HIPAA Special Enrollment Rights Notice

Under HIPAA, if you lose your group health plan coverage, you may be able to get into another group health plan for which you are eligible (such as a spouse's plan), even if the plan generally does not accept late enrollees, if you request enrollment within 30 days. Therefore, once your coverage ends, if you are eligible for coverage in another plan (such as a spouse's plan), you should request special enrollment as soon as possible. (Additional special enrollment rights are triggered by marriage, birth, adoption, and placement for adoption.)

If you have questions about your HIPAA rights, you may contact your state insurance department or the U.S. Department of Labor, Employee Benefits Security Administration (EBSA), toll-free at 1-866-444-3272 (for free HIPAA publications ask for publications concerning changes in health care laws). You may also contact the CMS publication hotline at 1-800-633-4227 (ask for Protecting Your Health Insurance Coverage). These publications and other useful information are also available on the Internet at: [www.dol.gov/ebsa](http://www.dol.gov/ebsa), the DOL's interactive Web pages - Health Elaws, or [www.cms.hhs.gov/healthinsreformforconsumer](http://www.cms.hhs.gov/healthinsreformforconsumer).