
Summary of Health Benefits for Postdoctoral Fellows and Students

in the
Johns Hopkins University
School of Medicine
the
Johns Hopkins Bloomberg
School of Public Health
the
Johns Hopkins University
School of Nursing

2009-2010

Please use this brochure in conjunction with the information on the University Health Services (UHS) website <http://www.hopkinsmedicine.org/uhs/> and the Student Health Program Summary Plan Description (SPD). SPDs are available at the UHS Benefits Office, the School of Medicine Registrar's Office, the Bloomberg School of Public Health Student Accounts and Student Affairs Offices, the School of Nursing Student Accounts Office, and the UHS Health Center.

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Health Plan Summary

Individuals enrolled in the Johns Hopkins University School of Medicine, the Johns Hopkins Bloomberg School of Public Health and the Johns Hopkins University School of Nursing receive health benefits from two different entities that are designed to complement each other: The Student Health Program and University Health Services.

Payors of Medical Care:

The Student Health Program (SHP) is an insurance plan which is administered by the Johns Hopkins Employer Health Programs (EHP). The SHP covers 100% of most medical needs and has a 3 tier co-pay pharmacy benefit for prescriptions. You are covered worldwide and can see a physician of your choice. You will pay less if you see a physician that is an EHP-participating provider. You can further maximize your benefits if you see a physician from the UHS Health Center. See Understanding Reasonable & Customary Charges and Participating Providers section for more details.

Providers of Medical Care:

The UHS Health Center offers most comprehensive medical services at no cost to eligible students and fellows and their spouses/same-sex domestic partners. The Health Center is intended to provide most adult medical services. These services are customarily provided by full time faculty and professional staff of the School of Medicine. All physicians are board-certified internists. If you do not use the UHS Health Center for your primary care needs or for specialist referrals, and see a physician of your choice instead, you will be responsible for the balance after insurance payment (SHP).

University Mental Health offers a confidential source for students, trainees, postdoctoral fellows, and spouses/same-sex domestic partners seeking mental health help.

Adult Vision Care: One routine eye exam/contact lens evaluation per calendar year is provided by the Wilmer Institute Comprehensive Eye Service.

Adult Care Outside of the UHS Health Center: Care that is administered by a non-EHP-participating provider is generally covered at 80% of the Reasonable & Customary (R&C) charges by the Student Health Program. Any charges not covered by the SHP are your responsibility. Refer to the Understanding Reasonable & Customary Charges and Participating Providers section for more information.

- **Exception:** Occasionally a student's academic program or academic assignment is based outside of Maryland making it impossible to take advantage of the Health Center's services. Such students should notify the UHS Benefits Office of their prospective situation to discuss supplemental benefits allowed for comparable services. Please note: Supplemental benefits are not available for medical care received while on personal vacation.

Pediatric Care: Children of eligible participants are covered for care provided by a pediatrician of their choice. You may wish to select an EHP-participating provider from www.ehp.org in order to reduce your out-of-pocket expenses. Non-EHP-participating providers may charge above and beyond Reasonable & Customary charges. Those charges are your responsibility.

Eligibility

Who is eligible to use UHS benefits?

School of Medicine – Students, Postdoctoral Fellows, Trainees and their spouses/same-sex domestic partners and dependent children who are enrolled in the Johns Hopkins Student Health Program (SHP). COBRA enrollees are also eligible to continue using the UHS Health Center.

All full-time, part-time, and leave-of-absence students, fellows, and trainees must be covered by health insurance through the Johns Hopkins Student Health Program (SHP).

Spouses and dependent children must also be covered through the SHP or carry equivalent

coverage acceptable to the School of Medicine. Foreign insurance is not acceptable for students or dependents in the School of Medicine. **Only those enrolled in the SHP can utilize UHS benefits, including access to the UHS Health Center and to University Mental Health.** Spouses/same-sex domestic partners and dependent children with equivalent coverage are not eligible for UHS services.

Bloomberg School of Public Health – Students, Fellows, and their spouses/same-sex domestic partners and dependent children who are enrolled in the Johns Hopkins Student Health Program (SHP). COBRA enrollees are also eligible to continue using the UHS Health Center.

In order to be eligible for UHS services, students and fellows (including spouses/same-sex domestic partners and dependent children) must enroll in the Johns Hopkins Student Health Program (SHP). Students, fellows and dependents enrolled in an equivalent insurance plan accepted by the Bloomberg School of Public Health are not eligible for UHS benefits. Additionally, students who have been granted a leave-of-absence or non-resident status are not eligible for UHS benefits.

School of Nursing – Students and their spouses/same-sex domestic partners and dependent children who are enrolled in the Johns Hopkins Student Health Program (SHP).

COBRA enrollees are also eligible to continue using the UHS Health Center.

Nursing students who are not enrolled in SHP are eligible to use the UHS Health Center only if they pay a separate annual Health Service Fee. This fee is paid directly to the School of Nursing and provides access to primary care office visits only. School of Nursing students who are not enrolled in SHP and do not pay the Health Service fee are not eligible to use the UHS Health center.

Enrollment

How do I enroll in the Student Health Program?

Enrollment in the SHP occurs within 30 days of an appointment start date, matriculation, or during the annual open enrollment period. Changes in enrollment status may also occur within 30 days of a life event (birth, adoption, marriage, divorce, death, spouse/same-sex domestic partner loses his/her current coverage, etc.); appropriate supporting documentation is required. Enrollment application must be made through the School of Medicine Registrar's Office, 147 Broadway Research Building, the Bloomberg School of Public Health Student Accounts Office, W1101 School of Public Health Building, Bloomberg School of Public Health Student Affairs Office, E1002 School of Public Health Building, and the School of Nursing Student Accounts Office, Room 336.

Student Health Program (insurance component of benefits)

The Student Health Program (SHP) consists of:

- Calendar Year Deductible: \$100 Individual; \$300 Family*
- 30 days Hospitalization for medical and/or mental health care at 100% of Reasonable & Customary (R&C) charges; then 80% of R&C charges
- 7 days per calendar year for substance abuse detoxification at 100% of R&C charges; then 80% of R&C charges
- Diagnostic X-ray and Laboratory Testing at 100% of R&C
- Professional Medical & Surgical Fees at 80% of R&C
- Inpatient Professional Medical & Surgical Fees at 80% of R&C
- Outpatient Professional Medical Fees 80-100% depending on option selected. See Medical Benefits-At-A-Glance
- Emergency Room Care for illness or injury (within 72 hours of emergency) at 100% of R&C; 80% of R&C (for care received after 72 hours of emergency)
- Urgent Care Center for illness or injury at 100% of R&C
- Prescription coverage: 3 tier payment structure: \$10, \$20 and \$35 co-pay
- \$1,000,000 Maximum lifetime benefit
- \$250,000 Maximum lifetime benefit (substance abuse)

- The SHP has a calendar year out-of-pocket maximum as follows:

Individual \$3,000
 Family \$9,000

All medical expenses incurred that are not covered by the SHP insurance or by the UHS Benefits Office will be the financial responsibility of the student or fellow.

Understanding Reasonable & Customary Charges and Participating Providers

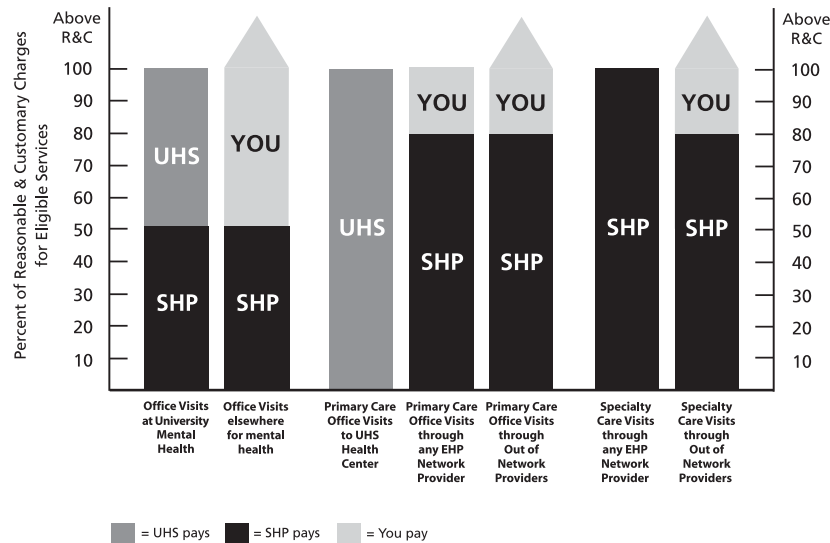
An EHP-participating provider has agreed to accept an EHP-contractual amount (Reasonable & Customary charge) as the fee for service. The Reasonable & Customary charge (R&C) is the usual fee charged by similar providers for the same services in the same geographic area. The Johns Hopkins Employer Health Program (EHP) has determined what is reasonable and customary.

Basically, the Student Health Program covers most inpatient charges and outpatient diagnostic work associated with an illness or injury at approximately 80%-100% of R&C. For adult care you can maximize your benefits by seeing a physician from the UHS Health Center. The UHS Health Center is an EHP-participating provider.

If you choose to seek adult care outside of the UHS Health Center, you can minimize your out-of-pocket expenses by selecting an EHP-participating provider through www.ehp.org. Please refer to Medical Benefits-At-A-Glance on pages 13-16.

Children of eligible participants are covered for care provided by a pediatrician of their choice. You may wish to select an EHP-participating pediatrician from www.ehp.org in order to reduce your out-of-pocket expenses. Any charges above and beyond R&C are your responsibility.

Payment Summary for Eligible Services



Pharmacy Benefits

Participants in the SHP (group #E00016) are covered by Caremark Prescription Services (group #W756999).

The Plan has a three-tier co-payment benefit as follows:

- Tier One: All Generic Drugs (lowest co-pay, \$10 for retail [each 30 day supply up to 90 days] and \$20 for mail order [90 day supply])

- Tier Two: Preferred Brand Drugs (middle co-pay, \$20 for retail [each 30 day supply up to 90 days] and \$40 for mail order [90 day supply])
- Tier Three: Non-Preferred Brand Drugs (highest co-pay, \$35 for retail [each 30 day supply up to 90 days] and \$70 for mail order [90 day supply])
- If prescribed drug is less than the co-pay the member pays the lesser amount
- No deductible applies to Pharmacy Benefits

SHP in-network pharmacies are listed in a Pharmacy Directory which is available at the School of Medicine Registrar's Office, the Bloomberg School of Public Health Student Accounts and Student Affairs Offices, the School of Nursing Student Accounts Office and the UHS Benefits Office. A cost saving mail order prescription program is available for the convenient purchase of maintenance prescriptions. **Please Note: The prescription plan covers oral contraceptives.** Detailed information on the Pharmacy benefit is on the UHS website: <http://www.hopkinsmedicine.org/uhs>.

The Student Health Program coverage is described in further detail in the Summary Plan Description (SPD) that can be obtained from the UHS Benefits Office, University Health Services Health Center, the School of Medicine Registrar's Office, and the Bloomberg School of Public Health Student Accounts and Student Affairs Offices and the School of Nursing. For a summary comparison of the Student Health Program benefits and UHS Benefits Office supplemental benefits, please refer to Medical Benefits-At-A-Glance on pages 13-16.

- Exclusions:** Prescriptions are covered if written by your primary physician or a specialist referred by your primary physician. Prescriptions written by an SHP subscriber for another covered person in the SHP will not be covered by the prescription program. Prescriptions are also not covered under the SHP if written by a blood relative or a family member living in the home.

University Health Services Health Center

Location & Hours: Adult medical services are provided at no cost to the participant at the UHS Health Center at 401 N. Caroline Street. The hours of operation are from 8:00 a.m. to 5:00 p.m., Monday through Friday and evening hours are available on Thursdays from 5 p.m. to 7 p.m. The UHS Health Center is not a walk-in clinic. Appointments can be scheduled between the hours of 8:00 a.m. and 5:00 p.m., including the lunch hour. Please make appointments in advance to avoid scheduling conflicts. If you cannot keep a scheduled appointment, please call and cancel as soon as possible.

UHS Physicians: Care is provided by faculty and professional staff of the Division of General Internal Medicine. For continuity of care, you have been assigned a medical provider to oversee your care during your stay at Hopkins. Biographical information and photographs of the physicians and staff working in the Health Center, as well as their contact information, are listed on the UHS website: <http://www.hopkinsmedicine.org/uhs/>

Confidentiality: Your records of visits to the UHS Health Center are subject to the same laws as any Johns Hopkins medical record according to strict federal guidelines. Communications between physician and patient are kept in the strictest confidence.

Description of Services Provided by UHS

Adult Care

- PRIMARY MEDICAL CARE:** Comprehensive adult medical services are provided by the UHS Health Center staff on an appointment basis.
- EMERGENCY ROOM CARE:** An emergency exists if immediate treatment is needed as the result of a sudden or serious illness or injury; a delay in treatment could jeopardize the patient's life, health, or ability to regain maximum bodily function.
 - In an emergency medical situation, you should go to the nearest medical facility with an emergency room for immediate care.

- ◆ If you have any questions about the seriousness of your medical needs, you should contact your UHS Health Center physician or their coverage for instructions. After hours please call 410-955-4331 for medical/surgical emergencies and 410-955-1892 for psychiatric emergencies. UHS Health Center physicians are only allowed to provide medical advice for their own patients. If you have the Student Health Program, but are not seeing one of the UHS Health Center providers, please call your personal physician's office for advice, as UHS Health Center physicians will not be able to assist you.
- ◆ You must notify the SHP within 48 hours of any emergency room care in order to receive insurance coverage.
- ◆ If you receive care in an emergency room for a condition that is not a true emergency (as defined above) the visit will not be covered by the SHP unless you have been referred to the Emergency Room by your physician. Please ask your physician's office to document the referral by contacting EHP within 72 hours.
- **URGENT CARE:** In the event of a medical situation that requires prompt attention but may not be serious enough to warrant a trip to the emergency room, it is very important to first contact your adult primary care physician or pediatrician for instructions on how the problem should be handled. If your primary care physician is a UHS Health Center physician, or University Mental Health Physician, and you need to reach them after hours, please call 410-955-4331 for medical/surgical emergencies, or, for psychiatric emergencies, please call 410-955-1892.
 - ◆ You will be scheduled for treatment at the UHS Health Center or referred to an urgent care center or emergency room depending on your needs. The Student Health Program covers 100% of R&C charges for urgent care visits. Referrals to urgent care centers are not required.
- **REFERRALS TO CONSULTANTS AND SPECIALISTS:** The SHP allows you to self-refer to specialists within the Johns Hopkins Hospital and Health system. However, please be aware that many specialists will refuse to see you without a note from your primary care physician stating the reason for the referral. In addition, a note from your primary care provider may help ensure a more timely appointment with a specialist.
- **DIAGNOSTIC TESTS:** Diagnostic tests are ordered through the UHS Health Center. Diagnostic tests are generally covered by the SHP. Be certain to give full SHP information to the appropriate billing office where services are provided. To better serve the SHP membership arrangements have been made to use the 550 Phlebotomy Lab, 550 N. Broadway, Room 112, for most blood drawing services on the East Baltimore Medical Campus. All other EHP participating labs off-campus are available for use.
- **ANNUAL PHYSICAL EXAMINATIONS:** Physicals are available through the UHS Health Center at no cost to participants enrolled in SHP or who have paid a Health Service fee. Please note: If you use a provider other than the UHS Health Center for a routine physical examination, then all charges will be your responsibility since the SHP does not cover these routine physical examinations.
- **GYNECOLOGICAL CARE:** Gynecological examinations, pap smears, and treatment of uncomplicated problems are available through the UHS Health Center at no cost to the SHP participant. Please note: If you use a provider other than the UHS Health Center for a routine GYN examination, the insurance (SHP) will cover 80% of the visit. You will be responsible for all charges not covered by SHP.
- **OBSTETRICAL CARE:** Preliminary counsel with respect to matters of reproductive health is provided by the UHS Center staff for eligible participants in need of services. Once pregnancy is confirmed the UHS provider can recommend an OB provider to you or you can decide on an OB provider. In deciding on a provider you may want to consider any liability you may have after the insurance payment. A schedule of benefits

is provided to assist you in determining benefits coverage (see Medical Benefits-At-A-Glance, pages 13-16) or the SHP Summary Plan Description.

- **ADULT IMMUNIZATIONS:** The UHS Health Center administers adult immunizations. Fees for adult immunizations are covered by the Student Health Program. Hepatitis B vaccines are provided to the subscriber only by Occupational & Environmental Health, not by UHS. Gardasil is covered for women up to the age of 26.
- **TRAVEL IMMUNIZATIONS:** The Travel Medicine Consultation and Immunization Service administers travel immunizations and relevant information in the Johns Hopkins Outpatient Center, 410-955-8931, travelmedicine@jhmi.edu. No referral is necessary. Please make an appointment 2-4 weeks in advance of travel. Fees for travel immunizations are covered for School of Medicine students by the UHS Benefits Office only if required as part of a required or elective course. Following immunization, submit the bill for payment or the receipt for reimbursement, if you paid, to the UHS Benefits Office. Fees for travel immunizations for Bloomberg School of Public Health students and School of Nursing students are not covered by the UHS Benefits Office.

Adult Vision Care

One comprehensive eye exam/contact lens evaluation per calendar year is provided by the Wilmer Institute Comprehensive Eye Service at no cost to the participant. It is important that you identify yourself as a member of the Student Health Program who is eligible for UHS Benefits when making the appointment. Appointments may be made at any of the following sites:

- Johns Hopkins Hospital 410-955-5080
- Greenspring Station 410-583-2800
- Columbia 410-910-2330
- White Marsh 443-442-2020

Note: Provider bills for routine eye examination/contact lens evaluations, and an EOB if received, should be forwarded to the UHS Benefits Office for prompt payment by that office. Contact lenses and eyeglasses are not covered by the SHP or the UHS Benefits Office. However, the Wilmer Institute Comprehensive Eye Service provides 25% off the regular retail price for all prescription eyewear frames, lenses, and lens treatments; 10% off all non-prescription sunglasses; and 5% off a minimum purchase of 4 boxes of disposable or planned replacement contact lenses.

University Mental Health Services (UMH)

University Mental Health Services (UMH) offers a confidential source of mental health care for medical students, graduate students, trainees, postdoctoral fellows, and spouses/same-sex domestic partners seeking mental health help. Note: University Mental Health does not provide care to nursing students; nursing students receive mental health care at the Counseling Center on the Homewood campus.

The mental health benefit (through SHP and the UHS) provides unlimited visits if care is received through the University Mental Health Service (UMH). It is financially advantageous to use the UMH. If you seek care outside of the UMH the SHP provides 52% of the reasonable and customary charges for the first 20 visits, then 50% of reasonable and customary charges for visits beyond 20.

The Mental Health program can help with a wide range of problems including:

- Sadness
- Grief
- Anxiety
- Alcohol and drug dependency
- Academic worries
- Concerns about living up to your potential
- Relationship difficulties

- Physical or emotional abuse
- Eating difficulties
- Excessive stress, etc.

LOCATION: The University Mental Health Office is located at 401 N. Caroline Street.

STAFF: Services are rendered on an out-patient basis by psychiatrists and staff of the Johns Hopkins Psychiatry Department. The Director of UMH is Michael J. Kaminsky, M.D.; the Clinical Coordinator of UMH is Mary Marshall Teer.

ACCESSING CARE: If you desire an appointment, please call 410-955-1892 to be scheduled as soon as possible with one of the University Mental Health professionals. During your first visit your needs will be evaluated and a comprehensive psychiatric and mental health evaluation will be conducted. A wide range of counseling techniques including medical diagnosis and treatment, psychodynamic therapy, and cognitive-behavioral therapy may then be utilized for your treatment. Referrals for continued treatment may be made to a mental health professional either on or off the Johns Hopkins Hospital campus. Appointments may also be made by calling the UHS Health Center. Please refer to the UHS website for more information.

PSYCHIATRIC EMERGENCIES: In an emergency a psychiatrist is always available. During the day, a psychiatrist can be reached through University Mental Health (410-955-1892). At night or on weekends, you should call 410-955-1892 for the psychiatrist on-call. After dialing the respective number, please wait for instructions.

CONFIDENTIALITY: Your treatment will be private and confidential. What you discuss with your treatment provider will not be communicated to anyone without your permission unless you become a danger to yourself or to others. Records of visits to University Mental Health are kept separately from the Johns Hopkins Hospital medical records system.

BILLING: All eligible students and their spouses/same-sex domestic partners are covered in full for services provided by a University Mental Health provider. If you have any questions about billing or insurance coverage, please call the University Health Services Benefits Office at 410-955-3872.

MENTAL HEALTH CARE OUTSIDE OF UMH: If you choose not to use University Mental Health and self-refer to a mental health professional, all eligible services provided outside of UMH will be covered by the Student Health Program at approximately 50% of the R&C charge. The balance is your responsibility. You may wish to select an EHP-participating provider through www.ehp.org in order to reduce your out-of-pocket expenses.

In addition to University Mental Health, the following services are available:

Faculty and Staff Assistance Program (FASAP) for Postdoctoral Fellows: Provides services to School of Medicine and Bloomberg School of Public Health Postdoctoral Fellows and their immediate family members.

Student Assistance Program (SAP) for School of Medicine & Bloomberg School of Public Health degree candidates: Being a student can sometimes be difficult. Balancing the demands of school, family, and work can be overwhelming. The Student Assistance Program (SAP) provides support to students dealing with the pressures and problems encountered during their academic careers. The SAP provides services to degree candidates and their immediate family members.

FASAP/SAP services include:

- Identification, assessment, and diagnosis of personal, family, school, and work-related problems
- Brief problem resolution and consultation
- Preventive and educational sessions
- Support and discussion groups
- Referrals to appropriate and accessible services and resources

LOCATION: Offices are located in East Baltimore, 550 N. Broadway, 550 Building, Suite 507, as well as at Johns Hopkins at Eastern, 1101 East 33rd St, Suite C-100.

STAFF: Services are rendered (on an out-patient basis) by licensed psychologists, social workers, and addiction counselors.

ACCESSING CARE: To schedule an appointment call 443-287-7000 or 443-997-7000. For more information on available services see www.fasap.org or www.jhu.edu/sap.

CONFIDENTIALITY: FASAP/SAP services are private and confidential in accordance with state and federal law and University policy.

FREE SERVICES: There is no cost for utilizing FASAP/SAP services. There may be fees associated with other services and resources if individuals are referred outside of FASAP/SAP. The SHP insurance usually defrays a portion of the cost of such care.

Pediatric Care

- **PRIMARY PEDIATRIC CARE:** Children of eligible participants are covered for care provided by a pediatrician of their choice. It is very important that as soon as possible after arrival, arrangements be made with a pediatrician for the care of dependent children. You may wish to select a participating provider from www.ehp.org in order to reduce your out-of-pocket expenses. Non-EHP-participating providers may charge above and beyond Reasonable & Customary charges. Those charges are your responsibility.
- **PEDIATRIC SPECIALTY CARE:** Visits are covered per the Medical Benefits-at-a-Glance
- **PEDIATRIC EMERGENCIES:** All pediatricians provide an on-call system for urgent problems which may arise after office hours. Should an urgent medical problem occur, it is essential that the pediatrician be contacted for instructions on how to handle the emergency. You must notify SHP within 48 hours of any emergency room care in order to receive insurance coverage. The UHS Benefits Office provides the calendar year deductible for emergency care referred by the pediatrician or the on-call pediatrician. If your child is over age two and receives care in an emergency room for a condition that is not a true emergency the visit will not be covered by the SHP or the UHS Benefits Office.

Emergency Room visits for children under age two will be treated as an emergency medical situation and will be covered. All Emergency Room visits referred by your pediatrician will be covered if your pediatrician documents the referral to SHP within 72 hours.

- **PEDIATRIC TESTS:** Fees for diagnostic tests ordered in connection with an illness or disease are generally covered by SHP. Testing in conjunction with well-child care examinations is covered by SHP. For testing in conjunction with well child care coverage refer to Medical Benefits-At-A-Glance. Be certain to give full information to the appropriate billing office where services are provided. Charges for tests not covered by the SHP are your responsibility.
- **PEDIATRIC MENTAL HEALTH SERVICES:** Mental health services are available to children of eligible participants and should be arranged through referrals made by your pediatrician or the child's school. The UHS Benefits Office will pay up to a maximum of \$100 per calendar year for pediatric mental health services if referred by your pediatrician or recommended by the child's school.
- **PEDIATRIC IMMUNIZATIONS:** Immunizations for children are provided by the pediatrician and are covered by the SHP. The SHP covers pediatric flu vaccines. Pediatric travel immunizations are not covered by UHS.
- **PEDIATRIC VISION CARE:** Routine pediatric eye exams are not covered. Exams for a specific problem are covered.

Miscellaneous

- **ALLERGY DESENSITIZATION:** The cost of the allergy injection serum is covered under the SHP prescription benefits.

- **HIV TESTING:** HIV testing is covered at 100% of R&C by the SHP. Confidential HIV testing is offered at the UHS Health Center.

University Health Services Benefits Office

LOCATION & HOURS: The UHS Benefits Office is located in the Hospital, Blalock 144. Office hours are from 8:30 a.m. to 5:00 p.m., Monday through Friday. Questions about billing and/or benefits should be directed to this office at 410-955-3872.

PROCEDURE FOR CLAIMS FILING: After medical care is provided, either you or your provider (physician, hospital, lab, etc.) will need to file an insurance claim with the insurance company (SHP) in order to receive benefits. In most cases the provider will file the claim for you. However, if your provider will not file the claim you will need to complete a claim form and send it, along with an itemized bill, to:

Johns Hopkins Employer Health Programs
Student Health Program
6704 Curtis Court
Glen Burnie, MD 21060

SHP claim forms are available in the School of Medicine Registrar's Office, the Bloomberg School of Public Health Student Accounts and Student Affairs Offices, the School of Nursing Student Accounts Office and the UHS Benefits Office. The deadline for claims submission for payment or reimbursement to SHP and/or UHS is 18 months after the incurred date of service for medical care.

BILLING DOCUMENTATION: Once the claim has been filed with SHP, you may receive a bill and an Explanation of Benefits (EOB) from SHP for each physician office visit or service received. (See samples on page 19.)

1. The Student Health Program will send you an Explanation of Benefits (EOB), which is an itemized description of services that shows the total cost of the services, what portion was paid by SHP, and if there is a member liability. These EOBs will say on them "This is not a bill." Do not throw away any EOBs.
2. The service provider (physician, hospital, lab, etc.) may send you a bill for the balance once the Student Health Program has made payment for services. The bill will be for the member liability as described in the Explanation of Benefits (EOB). The member liability is the portion that is owed after the SHP has paid the provider. This is a real bill and you need to make sure the balance gets paid (see below).

Please note: You will not receive a bill for a visit to the UHS Health Center since the billing process for UHS Health Center visits is handled internally by UHS. However, you will receive an EOB for a visit to the UHS Health Center for your own records. UHS Health Center will be listed as the provider in the top right corner of the EOB. For visits to specialists, you may receive both an EOB and a provider bill.

PAYMENT OF BILLS: Hold on to all EOBs and bills. **DO NOT IGNORE THESE DOCUMENTS.** EOBs may not be generated for all routine eye exam/contact lens evaluations through the Wilmer Institute Comprehensive Eye Service. Bills and EOBs must be in their original form. However, you may wish to keep a photocopy of all documents for your own records. If you have any questions about EOB and provider balances please contact the UHS Benefits Office.

Important Points to Remember about the UHS Benefits Office:

- It is the participant's responsibility to understand what services are and are not covered by the SHP and/or the UHS Benefits Office prior to seeking care.
- Procedures and hospitalizations are generally covered by the SHP at 80% or 100% of the R&C charge. The UHS Benefits Office does not provide supplemental coverage for these services. The balance after SHP is your responsibility.

EMERGENCY ROOM CARE: The SHP covers 100% of Reasonable & Customary charges (R&C) for emergency room treatment received within 72 hours of the onset of the emergency (whether due to an illness or injury). Treatment received after 72 hours of the onset of the emergency will be covered by the SHP at 80% of the R&C charge. You will receive an EOB and provider bill for emergency room care. The UHS Benefits Office will pay the calendar year deductible for emergency care that was referred by the UHS Health Center/on-call physician or pediatrician. Submit the EOB and provider bill to the UHS Benefits Office for payment of the deductible. No other supplemental payment is provided by the UHS Benefits Office for emergency room care.

TREATMENT AT AN URGENT CARE CENTER: The SHP covers 100% of R&C charges for medical care provided at an urgent care center. You may receive an EOB and provider bill for urgent care center visits, which should be submitted to the UHS Benefits Office for payment.

REFERRALS TO CONSULTANTS & SPECIALISTS: The SHP covers 100% of R&C charges for medical care provided by an EHP-participating provider.

VISION CARE: Provider bills, and EOBs if received, for routine eye examinations/contact lens evaluations obtained through the Wilmer Institute Comprehensive Eye Service should be forwarded to the UHS Benefits Office for 100% payment by that office.

MENTAL HEALTH CARE: University Mental Health provides mental health services for eligible adult participants at no cost to the patient. An EOB will be issued for each visit. However, there will not be any accompanying provider bills because billing is handled internally through UHS. An EOB and provider bill will be issued for any visits to a mental health professional outside of University Mental Health. Assistance in processing claims will be provided by the UHS Benefits Office. The UHS Benefits Office will pay up to a maximum of \$100 per calendar year for pediatric mental health services if referred by your pediatrician or recommended by the child's school.

PEDIATRIC CARE: Please refer to Medical Benefits-At-A-Glance. The SHP covers 100% of R&C charges associated with eligible well-child services and 100% of R&C charges for sick visits. Any charges above and beyond R&C are the member's responsibility.

- Some providers require the subscriber to pay 100% of the bill at the time of service. The subscriber then needs to file a claim with the SHP for reimbursement. The UHS Benefits Office will assist you in taking the appropriate action.

Benefits Exclusions: Please refer to the Student Health Program Summary Plan Description.

- Items listed under What's Not Covered in the SHP Summary Plan Description

Definitions

University Health Services (UHS): A system of care which provides health services to eligible students, house staff, fellows, trainees and dependents in the Johns Hopkins School of Medicine, Bloomberg School of Public Health and School of Nursing. UHS includes the UHS Health Center, the UHS Billing/Benefits Office, University Mental Health, and the SHP insurance program.

Student Health Program (SHP): The student health insurance program administered through Johns Hopkins Employer Health Programs (EHP).

University Health Services (UHS) Health Center: The adult primary care center for eligible participants and adult dependents providing most medical care and referrals to specialists. Located at 401 N. Caroline Street.

University Health Services (UHS) Benefits Office: The UHS Benefits Office provides service to you for billing and benefits inquiries and makes payments to approved providers for eligible medical services rendered. The UHS Benefits Office is located at Blalock 144, Johns Hopkins Hospital.

University Mental Health (UMH): University Mental Health offers mental health care to eligible students, fellows, and adult dependents. UMH is located at 401 N. Caroline Street.

Participating Provider: A physician, hospital, lab, etc. who has agreed to accept an EHP contractual amount (Reasonable & Customary charge) as fee for service.

- Student Health Program participating providers are listed on the www.ehp.org website.
- The UHS Health Center is an EHP-participating provider.

Reasonable & Customary Charges (R&C): This is the usual fee charged by similar providers for the same services or supplies in the same geographic area. Johns Hopkins Employer Health Programs (EHP) determines what is reasonable and customary.

Deductible: The amount you must pay for services each calendar year before the SHP begins to pay for benefits. The UHS Benefits Office pays the calendar year deductible for eligible adult care received through or referred by the UHS Health Center/on-call physician as well as for eligible pediatric services. There is no deductible for prescriptions.

Coinsurance: Your share for certain medical expenses after the deductible is met.

Out-of-pocket Maximum: Since you are responsible for a portion of the cost of your medical expenses, the Student Health Program includes an annual out-of-pocket limit to protect you in the event of high medical bills. After you have paid the out-of-pocket limit (\$3,000 per person or \$9,000 per family), the SHP covers any additional medical expenses incurred in the same calendar year at 100%.

- The out-of-pocket limit includes the deductible and coinsurance but does not include: penalties, prescription drug coinsurance and expenses, program maximums, any charges for services which are not covered, or mental health and substance abuse charges, including for treatment of alcoholism.

Explanation of Benefits (EOB): An itemized statement that describes benefits processed by your insurance (SHP) once medical services are provided and charges are submitted to the SHP. The EOB is issued by the Student Health Program.

Student: Enrolled as a student in the Johns Hopkins University School of Medicine, Johns Hopkins University Bloomberg School of Public Health, Johns Hopkins University School of Nursing or the Johns Hopkins Hospital School of Medical Imaging (generally includes degree candidates, visiting students, house staff, postdoctoral students, and trainees).

Spouse: One who is of the opposite sex and is married to a student by a ceremony recognized by the law of Maryland. A husband or wife is a spouse until a court formally decrees the marriage to be dissolved.

Domestic Partner: Two non-related adults of the same sex, both of whom are at least 18 years of age, are committed as a family in a long-term relationship of indefinite duration and are socially, emotionally, and financially interdependent in an exclusive mutual commitment in which they agree to be responsible for each other's common welfare and share financial obligations. This definition covers same-sex partner relationships, and not persons who are cohabiting simply as roommates.

Child: Unmarried dependent children are covered until the end of the calendar year in which they reach age 19, unless they are full-time students and primarily supported by their parents, in which case they may be covered until the end of the calendar year in which they reach age 25, or until the end of the calendar year in which full-time student status ends, whichever comes first.

COBRA: The Consolidated Omnibus Budget Reconciliation Act (COBRA) allows extension of health insurance coverage for defined periods of time at your own expense providing application is made within 60 days of the termination of your appointment.

Benefit Period: January 1 - December 31 (calendar year)

Medical Benefits At-A-Glance

The following chart summarizes most of the benefits and services available under the Student Health Program (SHP). It is not a comprehensive listing of services provided. All benefits are subject to medical necessity.

Services and Supplies	Student Health Program Coverage		
	Option 1 Access Care through UHS	Option 2 Access Care through any EHP Network Providers	Option 3 Access Care through Out of Network Providers
TREATMENT OF ILLNESS OR INJURY			
Primary care office visit (age 19 and older)	100%	80%	80% of R&C after deductible
Adult specialty care office visit	Not provided	100%	80% of R&C after deductible
Pediatric care office visit (under age 19)	Not provided	100%	100% of R&C
Podiatry care office visit	Not provided	100%	100% of R&C
Diagnostic services and treatment	Not provided	100%	100% of R&C
PREVENTIVE SERVICES			
Adult General physical exam	100%	Not covered	Not covered
Diagnostic services for physical exam	100%	100%	Not covered
Well-child care: office visits, immunizations and PKU, flu vaccine, urinalysis and lead testing	Not provided	100%	100% of R&C
Mammograms (screening) Once per 12 month period	Not provided	100%	100% of R&C
Colonoscopy screening	Not provided	80%	80% of R&C after deductible
Annual GYN exam Once per 12 month period	100%	80%	80% of R&C after deductible
Annual Pap (pathology only) Once per 12 month period	100%	100% for JHH/JHU 80% for all other in-network providers	80% of R&C after deductible
Adult immunizations and inoculations; Gardasil is covered by insurance only for the FDA-approved age range 9-26	100%	Not covered	Not covered
SURGICAL PROCEDURES			
Professional services for inpatient and outpatient surgery	Not provided	80% ⁽²⁾	80% of R&C after deductible ⁽³⁾
Reconstructive and/or surgically implanted prosthetics	Not provided	80% ⁽²⁾	80% of R&C after deductible ⁽²⁾
LABORATORY AND X-RAY PROCEDURES			
Laboratory tests, imaging exams, X-rays and ultrasound	Not provided	100%	100% of R&C
REPRODUCTIVE HEALTH			
Physician office visits (for prenatal care only)	100%	100%	80% of R&C after deductible ⁽²⁾

Services and Supplies	Student Health Program Coverage		
	Option 1 Access Care through UHS	Option 2 Access Care through any EHP Network Providers	Option 3 Access Care through Out of Network Providers
REPRODUCTIVE HEALTH (Continued)			
Charges for delivery and related anesthesia	Not provided	100% ⁽²⁾	80% of R&C after deductible ⁽²⁾
Newborn care – Initial and discharge visits only	Not provided	100% ⁽²⁾	100% of R&C ⁽²⁾
Newborn care – all other inpatient visits	Not provided	80% ⁽²⁾	80% of R&C after deductible ⁽²⁾
Birthing center (licensed facility only)	Not provided	100% ⁽²⁾	100% of R&C ⁽²⁾
Voluntary sterilization	Not provided	80% ⁽²⁾	80% of R&C after deductible ⁽²⁾
ALLERGY TESTS AND PROCEDURES			
Allergy tests	Not provided	100%	100% of R&C
Desensitization materials and serum	Not provided	80%	80% of R&C after deductible
URGENT CARE CENTER			
Physician visit	Not provided	100%	100% of R&C
Diagnostic services and treatment	Not provided	100%	100% of R&C
EMERGENCY SERVICES			
Emergency care (the onset of a sudden and serious condition requiring immediate care) Facility and professional fees	Not provided	100% for services within 72 hours after onset of emergency, then 80% after deductible	100% of R&C for services within 72 hours after onset of emergency, then 80% of R&C after deductible
HOSPITAL CARE			
Inpatient care (semi-private, unless private room is medically necessary)	Not provided	100% for 1st 30 days, then 80% after deductible ⁽²⁾	100% of R&C for 1st 30 days, then 80% of R&C after deductible ⁽²⁾
Intensive care	Not provided	100% for 1st 30 days, then 80% after deductible ⁽²⁾	100% of R&C for 1st 30 days, then 80% of R&C after deductible ⁽²⁾
Other inpatient services	Not provided	100% for 1st 30 days, then 80% after deductible ⁽²⁾	100% of R&C for 1st 30 days, then 80% of R&C after deductible ⁽²⁾
Inpatient physician services (excluding surgical services)	Not provided	80% ⁽²⁾	80% of R&C after deductible ⁽²⁾
Skilled nursing rehabilitation facility	Not provided	100% for 1st 30 days, then 80% after deductible ⁽²⁾	100% of R&C for 1st 30 days, then 80% of R&C after deductible ⁽²⁾
Exams and testing prior to outpatient surgery	100%	100%	100% of R&C
Outpatient surgery facility charges, including freestanding surgical centers	Not provided	100% ⁽²⁾	100% of R&C ⁽²⁾

Services and Supplies	Student Health Program Coverage		
	Option 1 Access Care through UHS	Option 2 Access Care through any EHP Network Providers	Option 3 Access Care through Out of Network Providers
CHEMOTHERAPY/RADIATION THERAPY			
Physician visit	Not provided	100%	80% of R&C after deductible
Physician Materials	Not provided	80%	80% of R&C after deductible
ACUPUNCTURE			
\$300 maximum per calendar year	Not provided	80%	80% of R&C after deductible
HOME HEALTH CARE			
Must be provided by a licensed health care organization	Not provided	100% for 1st 90 visits per calendar year, then 80% after deductible ⁽²⁾	100% of R&C for 1st 90 visits per calendar year, then 80% of R&C after deductible ⁽²⁾
HOSPICE CARE			
Inpatient and home	Not provided	100% ⁽²⁾	100% of R&C ⁽²⁾
AMBULANCE TRANSPORTATION			
To and/or from a hospital only	Not provided	80%	80% of R&C after deductible
SPEECH THERAPY			
Restorative, non-developmental therapy only	Not provided	80% ⁽²⁾⁽⁵⁾	80% of R&C after deductible ⁽²⁾⁽⁵⁾
PHYSICAL/OCCUPATIONAL THERAPY			
Excludes maintenance therapy	Not provided	80%	80% of R&C after deductible
CHIROPRACTIC CARE			
Restricted to initial evaluation, X-rays and spinal manipulations \$1,000 calendar year maximum	Not provided	80%	80% of R&C after deductible
DURABLE MEDICAL EQUIPMENT			
Equipment, prosthetic appliances and medical supplies	Not provided	80% ⁽²⁾	80% of R&C after deductible ⁽²⁾
MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES			
Professional fees for outpatient mental health treatment	100% combined benefit provided. SHP pays 52% 1st 20 visits per calendar year, then 50% balance paid by UMH	52% for 1st 20 visits per calendar year, then 50%	52% of R&C after deductible for 1st 20 visits per calendar year, then 50% of R&C after deductible
Professional fees for inpatient mental health care	Not provided	80%	80% of R&C after deductible
Facility charges for inpatient mental health care	Not provided	100% for 30 days, then 80% after deductible ⁽²⁾⁽⁴⁾	100% of R&C for 30 days, then 80% of R&C after deductible ⁽²⁾⁽⁴⁾

Services and Supplies	Student Health Program Coverage		
	Option 1 Access Care through UHS	Option 2 Access Care through any EHP Network Providers	Option 3 Access Care through Out of Network Providers
MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES (Continued)			
Facility charges for inpatient alcohol and substance abuse care	Not provided	Alcohol detoxification: 100% for 7 days per calendar year, then 80% after deductible ⁽²⁾⁽⁴⁾ Substance abuse rehabilitation: 100% for 30 days per calendar year, then 80% after deductible ⁽²⁾⁽⁴⁾	Alcohol detoxification: 100% of R&C for 7 days per calendar year, then 80% of R&C after deductible ⁽²⁾⁽⁴⁾ Substance abuse rehabilitation: 100% of R&C for 30 days per calendar year, then 80% of R&C after deductible ⁽²⁾⁽⁴⁾
Professional fees for inpatient alcohol and substance abuse care	Not provided	80% after deductible	80% of R&C after deductible
Professional fees for outpatient alcohol and substance abuse treatment	100%	100%	80% of R&C after deductible
Facility charges for outpatient alcohol and substance abuse treatment (30 day visit maximum per calendar year)	Not provided	100% up to 30 visits per calendar year maximum	100% of R&C up to 30 visits per calendar year maximum
MAXIMUM LIFETIME BENEFIT PER PERSON	\$1,000,000		
MAXIMUM LIFETIME BENEFIT PER PERSON FOR ALCOHOL AND SUBSTANCE ABUSE	\$250,000 120 days/visits combined for all inpatient and outpatient care		
CALENDAR YEAR DEDUCTIBLE (ALL OPTIONS COMBINED)			
Individual	None	\$100	\$100
Family	None	\$300	\$300
COINSURANCE OUT OF POCKET MAXIMUM PER CALENDAR YEAR (ALL OPTIONS COMBINED)			
Individual	\$3000	\$3000	\$3000
Family	\$9000	\$9000	\$9000
PRESCRIPTION DRUGS			
NETWORK PHARMACY			
In-network pharmacy for each 30-day supply	\$10 co-pay – generic \$20 co-pay – brand preferred formulary \$35 co-pay – brand non-preferred		
90-day supply	Mail order \$20 co-pay – generic \$40 co-pay – brand preferred formulary \$70 co-pay – brand non-preferred	In-network pharmacy \$30 co-pay – generic \$60 co-pay – brand preferred formulary \$105 co-pay – brand non-preferred	

⁽¹⁾ "R&C" (Reasonable and Customary Charge) is defined on pages 4 & 12.

⁽²⁾ Failure to obtain pre-certification may result in a penalty or possible denial of benefit

⁽³⁾ JH Medical Campus preferred Blood Draw Lab, 550 Building, Suite 112, 550 N. Broadway, Baltimore, MD 21205

⁽⁴⁾ Two partial hospitalization days equal one inpatient hospital day and are paid according to the inpatient benefit level

⁽⁵⁾ Covered benefits only include therapy aimed at restoring the level of speech the individual had attained before the onset of a condition (i.e., before illness or injury). Speech therapy for developmental disorders, such as stuttering, articulation disorders, tongue thrust, lisping, etc., is **Not Covered**.

UHS Student Advisory Committee

UHS welcomes student input and suggestions. To assist in this process, a UHS Student Advisory Committee meets monthly from September to June. Representatives from each student body interact closely with UHS in planning and implementing various policies and provide a direct link between students and UHS administration.

For the names of your representatives, contact your student body.

- Medical Student Society
- School of Medicine Graduate Student Association: www.hopkinsmedicine.org/gsa/
- Postdoctoral Fellow Association: jhpda-g@jhmi.edu
- Bloomberg School of Public Health: shprep@jhsphe.edu or www.jhsph.edu/assembly/shr
- School of Nursing: www.SON.jhmi.edu

UHS Advisory Board

Spyridon S. Marinopoulos, M.D., M.B.A.
Chair

Director, University Health Services

Sandra S. Angell, R.N., M.L.A.

Associate Dean for Student Affairs

Johns Hopkins University School of Nursing

Stephen Bazzetta

Director of Operations, Student Affairs

Bloomberg School of Public Health

Joseph G. Bezek, M.B.A.

Senior Director of Finance

Clinical Practice Association

Johns Hopkins University School of Medicine

Frederick L. Brancati, M.D., M.H.S.

Director, Division of

General Internal Medicine

Patricia M.C. Brown

President, Johns Hopkins HealthCare, LLC

Glory Christy, R.N.

Clinic Manager, University Health Services

J. Raymond DePaulo, M.D.

Chairman, Department of Psychiatry

Johns Hopkins University School of Medicine

James Erickson, M.B. A.

Executive Director of Finance

Johns Hopkins University School of Medicine

Kevin Fogarty

Senior Director Finance

Johns Hopkins University School of Medicine

Mary E. Foy

Associate Dean/Registrar

Johns Hopkins University School of Medicine

Richard A. Grossi

Vice President and Chief Financial Officer

Johns Hopkins Medicine

K. Carol Han, M.H.S.

Senior Administrative Manager

University Health Services

Michael Kaminsky, M.D.

Associate Professor of Psychiatry and Behavioral Sciences

Johns Hopkins University School of Medicine

Thomas Koenig, M.D.

Associate Dean for Medical Students

Johns Hopkins University School of Medicine

Peter Maloney, Ph.D.

Associate Dean for Graduate Student Affairs

Johns Hopkins University School of Medicine

Julia McMillan, M.D.

Associate Dean for Graduate

Medical Education

Johns Hopkins University School of Medicine

David Nichols, M.D.

Vice Dean for Education

Johns Hopkins University School of Medicine

Beryl Rosenstein, M.D.

Vice President for Medical Affairs

Johns Hopkins Hospital

Steven J. Thompson, M.B.A.

Senior Vice President, Johns Hopkins Medicine

Michael Ward

Associate Dean for Student Affairs

Bloomberg School of Public Health

Levi Watkins, M.D.

Associate Dean for Postdoctoral Affairs

Johns Hopkins University School of Medicine

Myron L. Weisfeldt, M.D.

Chairman, Department of Medicine

Johns Hopkins University School of Medicine

Darnell Williams

Assistant Manager

University Health Services

This brochure is provided to briefly outline those services available to students and fellows. Final interpretation of policies and benefits is the responsibility of the University Health Services. Please refer to the UHS website for up-to-date news and information: <http://www.hopkinsmedicine.org/uhs/index.html>

Benefits in this brochure are subject to change during the year. Refer to the UHS Website at <http://www.hopkinsmedicine.org/uhs/index.html> for updates and changes.


If further clarification is required with regard to UHS medical care coverage, the UHS Benefits Office (410-955-3872) should be contacted prior to seeking care.

Sample EOB and Provider Bill

Johns Hopkins Healthcare L.L.C.
6704 Curtis Court
Glen Burnie, MD 21060

200501190101

Forwarding Service Requested



PH11102812
EXP. DATE: 12/31/05

CUSTOMER SERVICE
Telephone: (410) 424-4400
(800) 261-2396
Fax: (410) 424-4602

Patient Name:
Patient ID Number:
Provider Name:
Provider ID Number:
Claim Number:
Payee Name
and Address:

Line of Business:
Account Number:
Check Date:
Check Number:

Explanation of Benefits-- This is NOT a Bill

Date of Service/ Procedure	Billed Amount	Allowed Amount	Above Maximum	Not Deductible Covered	Copay/ Coinsurance	Other Ins. Paid	Member Liability	Interest/ Discount	Paid Amount	Risks	
12/13/2004 12132004 Evaluation/Management	78.00	67.75	10.25	0.00	36.59	42.82	0.00	42.82	0.00	24.93	ARA, DRZZ CRAC
	78.00	67.75	10.25	0.00	36.59	42.82	0.00	42.82	0.00	24.93	

Code Message Description

ARA THIS AMOUNT REFLECTS THE ALLOWED AMOUNT FOR THIS SERVICE AND MAY DIFFER FROM BILLED AMOUNT.
CRAC CARE WAS RENDERED BY A PARTICIPATING PROVIDER. THIS CLAIM WAS PROCESSED AT THE DIRECT ACCESS TO NET WORK PROVIDERS BENEFIT LEVEL.
DRZZ DEDUCTIBLE AMOUNT, THIS IS A SUBSCRIBER'S LIABILITY

EOB

Samuel Smith, M.D.
1234 Professional Blvd., Suite 321
Baltimore, Maryland 21000

Patient: Mary Doe
Acct. No. 456789
Date: 03/01/2005

STATEMENT OF ACCOUNT

Date	Description	Charge	Payment	Courtesy/ Disallow	Patient Balance
12/13/2004	Office Visit	78.00			
02/28/2005	EHP/Johns Hopkins		24.93	10.25	
	THIS BALANCE IS YOUR CO-PAY				42.82
	PLEASE PAY THIS AMOUNT:				42.82

Provider Bill

Notes