CONSUMER ALERT

DO I REALLY NEED TO INSURE MYSELF?
What College Students Need to Know About Health and Life Insurance Coverage

Everybody gets sick — so it is possible that the only insurance you use while in college is your health coverage. Whether your insurance is through your parents, a student policy or going to the school clinic, there are things the National Association of Insurance Commissioners suggest you know about health insurance when you are on your own for the first time.

What to Know About Health Insurance

You may have health insurance under your parent's policy, you may have insurance through a student health plan, or both.

PARENT'S HEALTH INSURANCE POLICY

Under the Patient Protection and Affordable Care Act, any insurance plan that offers dependent coverage must make that available until the dependent reaches age 26. Some states may have laws that require longer extensions of dependent coverage in certain situations. Call your state insurance department to verify the age limit and any qualifications or limitations (such as full-time student, military veteran or marital status).

If you are covered under your parent's insurance policy, you likely are covered by a Health Maintenance Organization (HMO) or Preferred Provider Organization (PPO). These types of insurers generally have a list of in-network doctors, hospitals and specialists you can see close to home. That means if you attend college out of town, there may be a limited number of doctors that take your insurance or you may have to pay out-of-network co-payments or co-insurance. Emergency care will likely be covered regardless.

STUDENT HEALTH INSURANCE PLANS

Students who do not have health insurance through a parent's policy, or who have limited coverage due to network service areas, may opt to purchase a student health insurance plan. Additionally, some schools may require a student health plan as part of registration. Student plans are sold by an insurer that has contracted with a college to offer coverage to its students. In general, these plans have more limited benefits and more exclusions than HMOs or PPOs and generally have limited coverage for prescriptions and preventive care.

MILITARY-RELATED COVERAGE

If you served in the military, or one of your parents did, you may get your insurance coverage through TriCare. The coverage for TriCare is provided by companies in four regions contracted
with the government. Make sure to check if you are changing regions when you leave for school. You or your parents can get more information about TriCare here.

**What You Should Always Be Able to Find**

Insurance Card – Keep this with your identification. If you get sick or hurt, you will be asked for this where you get treatment. The co-pay/co-insurance you have to pay for the visit will be printed on the card. You will have to pay the co-pay/co-insurance at the time of service/treatment.

List of Covered Doctors/Hospitals – Have your parents make a quick reference list of doctors, local care centers and hospitals where you can go in an emergency. If you have an HMO or PPO and are far from home, you may have limited options for doctors in your network. Your co-pay/co-insurance will likely be higher if you go to an out-of-network doctor or hospital. You may have to get pre-approval from the company before treatment out of network and these claims may require extra paperwork. For routine care, you may have to go home to see your family doctor.

List of Covered Pharmacies – Also have your parents make a quick reference list of the pharmacies where you can have prescriptions filled. Outside a treatment network for an HMO or PPO you should still have prescription coverage. The co-pay/co-insurance you are responsible for when picking up a prescription can vary based on the drug. Before you fill a prescription you or your parents should check with your insurance company to see what your cost will be. Generic drugs generally have a lower co-pay/co-insurance than name brand drugs. You can also ask the doctor while at the office if there is a generic version of the medication they are prescribing.

**When You Get Sick or You Get Hurt – Using Health Insurance**

- Once you decide you need medical treatment, you have to figure out who to see. Consult the quick reference list of doctors or hospitals you have prepared.

- When you go for medical treatment, bring your health insurance card. Be ready to fill out paperwork that includes your personal information (as well as information on your parents), your insurance information and your health history. Fill this out as thoroughly as possible.

- At the end of your appointment you should get paperwork detailing all services and treatment given during your office visit. Save this. If there are any questions about the insurance company's payment, you may need this for reference.

- If the doctor is in your network of providers, their office will typically bill the insurance company directly. However, if you're going out of network, you may have to fill out additional forms.

- If there is a portion of your claim the insurance company does not pay, your doctor's office will send you a bill for the difference.

**Life Insurance**

You may be offered life insurance with your first job. Young people generally look to life insurance to help cover the costs of a funeral or medical expenses prior to death. If you do not
have dependents, additional insurance beyond the standard package offered by your employer may not be necessary. Your state insurance department [map.naic.org] can help you better understand and assess your life insurance needs. When you get life insurance at work you will have to name a beneficiary. Make sure whomever you name knows you have the policy and how to find the information if something happens to you. If you have questions about life insurance, start here.

Take Notes

Just like going to class and taking notes will help you understand philosophy or economics better, so will taking notes on your insurance. The NAIC's Insure U: Get Smart About Insurance education website has great information to help you “get” insurance. And there isn't a test, but if you're looking for a glossary of insurance terms for quick reference or a game of Words With Friends, go here.

Close to Home

Each state has an insurance department that can answer your questions about insurance. You'll find their phone number and a link to their website on this map. You'll also find several of them on Twitter and Facebook.

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The Utah Insurance Department is a state agency. Its mandate is to regulate insurance marketed and sold in Utah. Currently over 90,000 agents, agencies and insurers are licensed; domestic insurers are audited to verify financial stability and compliance with insurance laws; administrative action is taken against licensees found to be in violation of insurance laws; calls from consumers with questions or complaints are taken; and licensees and consumers are educated regarding insurance. For more information visit http://www.insurance.utah.gov/ or call toll free in-state @ 1-800-439-3805 or locally @ 801-538-3077.

The National Association of Insurance Commissioners (NAIC) is the U.S. standard-setting and regulatory support organization created and governed by the chief insurance regulators from the 50 states, the District of Columbia and five U.S. territories. Through the NAIC, state insurance regulators establish standards and best practices, conduct peer review, and coordinate their regulatory oversight. NAIC staff supports these efforts and represents the collective views of state regulators domestically and internationally. NAIC members, together with the central resources of the NAIC, form the national system of state-based insurance regulation in the U.S. For consumer information, visit insureUonline.org.