

Frequently Asked Questions

Where should I go to seek treatment when I need to?

Student Health Service on campus or from a physician in the PPO network. Benefits will be paid for 100% of the PPO allowable for charges incurred for covered services.

What is the deductible?

A deductible is the portion of the bill that you must pay before the insurance will begin to pay. The deductible on this plan is \$50.00 and is waived if treatment is first received at Student Health Insurance. For schools without a Student Health Service, the deductible will be waived if first seen by a campus nurse or health office.

Where am I covered?

You are covered anywhere in the world.

Where do I get my insurance card?

Your insurance card is given to the international student office once your name is submitted to Student Assurance Services, Inc. – this happens after your insurance premium is paid.

How do I use my card?

Show your card to the facility when you seek treatment and they will submit a claim for you.

Do I need to submit claims for myself?

You will need to submit some claims yourself, such as claims for prescription drugs that you receive after visiting a clinic or hospital. Most hospitals will submit the claim for you when you show your insurance card, or tell them your insurance information. Student Health Service will submit all claims for you, including prescriptions.

How do I submit claims myself?

Mail a copy of the bill and a claim form that can be obtained from Vaaler Insurance or the international office, to Student Assurance Services, Inc. at PO Box 196, Stillwater, MN 55082, ATTN: Claims

How can I check on a claim?

Contact Student Assurance Services, Inc. at 800-328-2739. Have your bill amount or your service date available or your Explanation of Benefits.

How long does it take before I will get payment back, or what is the claims process?

It usually takes an average of 15 days for claims to be processed and a check to be mailed out. It can take longer if additional information, such as medical records are needed to process the claims, then it will be closer to three months. You will receive an Explanation of Benefits (also called EOB) when processing is complete. This will tell you what the company has paid in regards to the bill.

Will I have to pay any part of my bill?

The plan has a deductible of \$50 which is your responsibility. The plan will cover the next \$50,000 of covered medical expenses at 100% if treatment is provided at Student Health Services or through a “network” provider and at 90% through an “out of network” provider. You can find a “network” provider at www.preferredone.com. For students only, the plan has 100% coverage of covered services from \$50,000 to \$100,000 and 90% of the Usual & Customary Charges for services rendered at “out of network” providers. Usual and Customary charges means there is an average charge that Student Assurance Services will cover for certain expenses. Please see brochure for further explanation.

Will everything be covered?

No, there are things that are not covered. Please read the list of exclusions on the brochure. These are things that this health plan will not cover.

Are physicals covered?

No, routine exams such as physicals are not covered. There must be some sort of sickness or illness or accident for you to have coverage under this insurance plan.

Does this plan cover dental or eye exams?

No, this plan does not have any coverage for routine dental or vision.

Can dependents sign up?

Yes, dependents can sign up for a fee. Please contact Vaaler Insurance at 800-732-4336 for more information.