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Important Contact Information

I have questions about what is covered, how to access benefits, enrollment concerns, or replacement ID cards.

Gallagher Koster
500 Victory Road
Quincy, MA 02171
Website: www.gallagherkoster.com/niagara
Phone: 1-877-320-4347
Email: niagarastudent@gallagherkoster.com

I have questions about a specific claim or claims payment.

HealthSmart, formerly Klais & Company, Inc.
1867 West Market Street
Akron, OH 44313-6977
Phone: 1-877-349-9017
Email: Klaisclaims@Klais.com

How can I find a Preferred Provider?

UnitedHealthcare Options PPO
Website: www.gallagherkoster.com/niagara, click on ‘Find a Doctor’

How can I find a Participating Pharmacy?

UnitedHealthcare Network Pharmacy (Optum Rx)
Website: www.gallagherkoster.com/niagara, click on ‘Pharmacy Program’
Phone: 1-877-417-7345

How do I learn more about Gallagher Koster Complements?

EyeMed Discount Vision Plan
Website: www.enrollwitheyemed.com
Phone: 1-866-839-3633

Basix Dental Savings and CampusFit
Website: www.basixstudent.com
Phone: 1-888-274-9961

How do I learn more about Worldwide Assistance Services?

FrontierMEDEX
Toll-free in the United States: 1-800-527-0218
Collect outside of the United States: 1-410-453-6330
Services are also available via email at operations@frontiermedex.com

How do I reach the Collegiate Assistance Program?

24-Hour Nurse Line
Phone: 1-877-643-5130

Enrollment & Eligibility

Who is eligible for the plan?

Students enrolled in 6 or more credits are eligible for the Student Health Insurance Plan. Niagara University students may enroll in the plan on a voluntary basis through Gallagher Koster.

How do I enroll?

Students who decide they would like to actively enroll in the plan may do so by completing the following steps:
2. Click on ‘Student Direct Pay Enrollment.’
3. Create a user account, or log in if you are a returning user.
4. Select the Blue ‘I want to Waive/Enroll’ button. Upon completing the form, you will be asked to review your information for accuracy and then click ‘submit’. Immediately upon submitting your online form you will receive a confirmation number. Please save this number and print a copy of your confirmation for your records.

How do I enroll my eligible dependents?

Students must purchase coverage for their eligible dependent(s) at the same time as their own initial plan enrollment. Dependent coverage must be purchased for the same time period as the student’s period of coverage and cannot exceed coverage purchased by the student. For example, a student enrolled for annual coverage cannot purchase dependent coverage for the spring semester unless a qualifying event, as defined below, occurs.

Students can also add eligible dependent(s) if they experience one of the following qualifying events: (a) marriage (b) birth of a child, (c) divorce, or (d) if the dependent is entering the country for the first time. If dependent enrollment meets one of these qualifying events, the Dependent Enrollment Form, supporting documentation and payment must be received by Gallagher Koster within 31 days of the qualifying event. If not received within 31 days of the qualifying event, the effective date of coverage will be the date this form and payment are received at Gallagher Koster. Once a dependent is enrolled, coverage cannot be terminated unless the student loses eligibility.

Students can enroll their eligible dependents online for an additional premium by visiting www.gallaghrkoster.com/niagara, selecting ‘Dependent Enroll’, and completing the form by the published deadline.

What about Health Care Reform? How does that affect my Student Health Insurance Plan?

If you are under the age of 26, you MAY be eligible to enroll as a dependent under the employer health insurance plan held by your parent(s). However, before you do so, you should fully compare the employer plan against this Student Health Insurance Plan to determine which plan’s rates, benefits and coverage are most appropriate for you.

In addition to the items mentioned above, keep in mind that Student Health Insurance Plans are generally less expensive than individual plans with similar benefits. In fact, your total out-of-pocket cost (including premium and deductibles) may be significantly LESS with this Student Health Insurance Plan, especially if your parents’ employer plan is considered a ‘high deductible’ plan.

I am international student. Is there anything I need to know before waiving coverage?

Before waiving you should review your current policy, considering the following:

- Will your current plan cover medical care beyond emergency services (i.e. doctor’s office visits, diagnostic testing, x-rays, prescription drugs, mental health, etc.) in the Niagara, NY area?
- Does your plan have doctors and hospitals in the Niagara, NY area?
- Check the cost -- is the annual cost of this Student Plan less expensive than the cost of being added as a dependent to your parents’ plan? Be sure to compare deductibles and total out-of-pocket costs, not just the annual premium.
- Are there administrative pre-requirements, pre-certification, or Primary Care Physician referrals required under your current plan that may delay receipt of care?

How do I waive coverage under the Student Health Insurance Plan?

If you are an international student and have determined your coverage to be comparable and would like to waive the Student Health Insurance Plan:

2. Click on the ‘Student Waive/Enroll’ link.
3. Create a user account, or log in if you are a returning user.
4. Select the Blue ‘I want to Waive/Enroll’ button. When waiving the insurance, have your current health insurance ID card ready as you will need this information in order to complete the waiver form. Upon completing the form, you will be asked to review your information for accuracy and then click ‘submit’. Immediately upon submitting your online form you will receive a confirmation number. Receipt of this confirmation number only confirms submission, not acceptance, of your Waiver Form. Please save this number and print a copy of the confirmation for your records.

Insurance Plan Benefits
What is covered under the Student Health Insurance Plan?

- The plan offers comprehensive benefits that include hospital room and board, inpatient and outpatient surgical procedures, labs and x-rays, chemotherapy and radiation, inpatient and outpatient mental health services, physician office visits, consultant visits, ambulance, emergency care and prescription drugs.
- Preventive Care Services are available to cover routine physicals and examinations, routine screenings, routine GYN examinations, and most immunizations with no cost sharing for a student when services are received by Preferred Providers.
- The maximum benefit allowed per insured person, per policy year is $500,000. Students should refer to their brochure schedule for details.
- Services provided by a participating Preferred Provider are generally covered at 80%, while services provided by an Out-of-Network Provider are generally covered at 60%.
- Please refer to the plan brochure available at [www.gallagherkoster.com/niagara](http://www.gallagherkoster.com/niagara) by clicking on ‘My Benefits and Plan Information’ for complete details about coverage, limitations, and exclusions.

How much does the plan cost?

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<tr>
<td>Dependent Child(ren)</td>
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<td>$1,988</td>
</tr>
</tbody>
</table>

How do I get my prescriptions filled?

- Prescriptions can be filled at any UnitedHealthcare Network Pharmacy. To find a list of participating pharmacies near you, visit [www.gallagherkoster.com/niagara](http://www.gallagherkoster.com/niagara) and click on ‘Pharmacy Program’.
- At designated UnitedHealthcare Network pharmacies you will pay a $15 copayment for a 30-day supply of a generic drug, a $30 copayment for a 30-day supply of a preferred brand name drug, and a $50 copayment for a 30-day supply of a non-preferred brand name drug, up to the $500,000 maximum benefit.
- Prescriptions are also available through a Mail Service Program. Through the Mail Service Program you will pay 2x the cost of a 30-day supply for a 90-day supply of your prescription drug. Click on ‘Pharmacy Program’ at [www.gallagherkoster.com/niagara](http://www.gallagherkoster.com/niagara) to learn the details of the pharmacy program, including the Mail Service Program. Students who take maintenance drugs are encouraged to use the Mail Service Program to be able to receive the maximum benefit available.
- Outpatient medications for treatment of a Covered Expense are covered prescriptions. If the treatment of a medical condition is limited or excluded from the plan, the outpatient prescription is likewise limited or excluded.
- Students who are studying or traveling abroad and need more than a 30-day supply of their prescription may fill out a Prescription Override form by visiting [www.gallagherkoster.com/niagara](http://www.gallagherkoster.com/niagara) and selecting ‘Pharmacy Program’, then ‘Pharmacy Override Form’.

Am I covered if I have a pre-existing condition?

If you are under the age of 19, you are immediately covered for pre-existing conditions. If you are 19 or older, you will be covered if you were continuously insured through another health insurance plan for the 6 months immediately prior to the effective date of the Student Health Insurance Plan without a lapse in coverage of more than 90 days. Once you have been enrolled in this plan for 6 months, your pre-existing condition will be covered as any other condition.

What is a pre-existing condition?

A pre-existing condition is one for which you sought medical advice, were diagnosed, received care or treatment, or were recommended care or treatment during the 6 months prior to the effective date of this plan.

Am I required to get a referral from my school’s Health Services before I seek treatment?

No, a referral is not required with the Student Health Insurance Plan, but there are many benefits to first seeking care or advice from Health Services. Students should be aware that on-campus Health Services are available to them. Your school’s Health Services website is: [http://www.niagara.edu/healthcenter/](http://www.niagara.edu/healthcenter/). Copayments are waived for treatment at the health center.
**Do I get an ID card?**

Yes, ID cards are available online. They may be printed using a home computer or viewed on your smart phone. It is recommended that you print a copy after you are enrolled in the plan and furnish it to the health service office.

**How do I print an ID card online?**

2. First time users will need to create a User Account. Returning users can log in using their existing account information.
4. Enter your Student ID number and your date of birth and click on ‘Authorize Account’.
5. You will be redirected to the ‘Account Home’ page, then click on ‘Generate ID Card’.

**Does this plan cover me when I am off campus, traveling or studying abroad?**

Yes, the Student Health Insurance Plan covers you during semester breaks, summer vacation and even if you’re traveling or studying abroad. You’ll be covered for the period for which you paid premium.

In addition to being covered for medical treatment and services, you will also be covered for Repatriation of Remains, Emergency Medical Expense Benefit and Travel Assistance Services through FrontierMEDEX, the 24-hour worldwide assistance service. All services must be arranged for in advance and provided by FrontierMEDEX. Any services not arranged by FrontierMEDEX will not be considered for payment.

- When studying or traveling abroad, keep your Student Health Insurance Plan identification card with you and take a copy of the brochure for reference.
- When outside of the United States, you will likely be asked to pay for your medical care first and will then need to seek reimbursement. Covered Expenses will be reimbursed on an Out-of-Network basis.
- When you submit claims for reimbursement, you will need to have the itemized bill(s) translated into English and include a letter informing the claims administrator that you are seeking reimbursement for charges previously paid.
- Please ensure that your name, ID number, address (to receive your reimbursement check), and the College’s name are on the bill.

**What is a deductible? Does this plan have a deductible?**

A deductible is the amount for which you are responsible before payment is made by the claims company. Once you have paid the deductible, whether it’s applied to one service or multiple services, the plan will pay for covered medical expenses as indicated in the plan brochure.

This plan has a $200 per insured person, per policy year deductible that applies to services received from a Preferred Provider, and a $400 per insured person, per policy year deductible that applies to services received from an Out-of-Network Provider.

**Finding a Provider**

**Can I go to any doctor or hospital?**

Yes, you can go to any provider; however, you will save money by seeing providers that participate in the UnitedHealthcare Options PPO network because providers participating in this network have agreed to accept a predetermined negotiated amount, or Preferred Allowance, as payment for their services.

Go to [www.gallagherkoster.com/niagara](http://www.gallagherkoster.com/niagara) and click on ‘Find a Doctor’ to locate participating providers.

**Claims Processing**

**What should I do if I receive a bill, or need to be reimbursed, for services I received?**

Physicians should bill the claims administrator. The billing information is on the back of your health insurance ID card. However, if you do receive a bill or if you have paid for a service and need to be reimbursed, please send your bill (and proof of payment if seeking reimbursement) to the claims administrator. You do not need an additional claim form. Make sure your name, health insurance ID number, and school name are on the bill. Make a copy for your records before sending to the claims administrator at the following address:

HealthSmart, formerly Klais & Company, Inc.
Is any other information needed in order to pay a claim?

If the treatment you received was a result of an accident, you will receive a letter from the claims administrator asking for information about the accident, i.e. was it the result of a car accident, from playing sports, etc. Your claim cannot be processed without this information, so please respond to the letter promptly. You may also receive a letter asking if you are covered by any other health insurance plan. It is important that you respond promptly to this as well.

How will my claims be paid if I have other health insurance in addition to the Student Health Insurance Plan?

The Student Health Insurance Plan has a coordination of benefits provision. This means your plan with Gallagher Koster will coordinate the payment of claims with your other insurance company. You will need to provide the claims company with information about your other health insurance company. Please refer to your brochure for details.

Plan Enhancements

What enhancements are available under this plan?

Exclusively from Gallagher Koster, enrolled students have access to a menu of products at no additional cost. More information is available by visiting www.gallaghrkoster.com/niagara and clicking on the ‘Discounts and Wellness’ link.

Will I be covered under the plan after I graduate?

Yes, you will be covered under the Student Health Insurance Plan until the end of the period for which you have purchased coverage.

Can I continue coverage after the policy terminates?

No, there is no option to continue coverage after this policy terminates.

Are there any additional insurance products available?

Please visit www.gallaghrkoster.com/niagara and click on the ‘Other Insurance Products’ link for complete details about additional insurance products that are available as well as enrollment information.

This document is only a summary of the benefits available. Please refer to the Summary Plan Description for a description of the benefits available and exclusions and limitations of the plan.