

Health Insurance for College Students

Is it Really Necessary?

The Affordable Care Act requires all persons filing taxes to have health insurance, or they will be subject to a penalty. In 2015, the penalty is the higher of either 2% of your yearly household income or \$325.00 per person.

As a UW-W student, you are able to receive health care from University Health and Counseling Services (UHCS). Most primary care needs can be met at UHCS with minor costs to the student however students may have healthcare needs that exceed what is available at UHCS. A full list of services and costs is available on the [UHCS website](#). Fees are either paid for in cash, Purple Points, or billed to a student's university account.

UHCS is available from 8:00 to 4:30, Monday through Friday, except for legal holidays. In the event a student has health care needs exceeding UHCS's capacity, staff will advise/refer them for care at an off-campus healthcare facility. If a student needs care outside of UHCS hours or has an illness or injury that threatens life or limb, they are directed to the closest emergency room. The cost for such outside care, be it a specialist, emergency care or hospitalization, can create extreme financial burdens very quickly. For example, the average cost of a 3-day hospital stay is around \$30,000. Students are encouraged to have health insurance.

UW-W does not offer a health insurance plan for domestic students.

What are the Options?

- Stay on your family's insurance plan

Young adults are able to stay on their family's insurance until the age of 26. Students should be aware of their plan's out of network coverage for routine care as well as emergency services and hospitalizations if they are leaving their coverage area.

- Enroll in coverage through the Marketplace

While enrollment in plans from the Marketplace only available November 1 - January 31, special consideration is given to individuals with qualifying life events such as changes in healthcare coverage. General plan information is available at <https://www.healthcare.gov/see-plans/>. To see if you qualify for lower premiums or tax credits, you must submit an application at <http://www.healthcare.gov>

- Purchase coverage through a private plan

If a student does not qualify for a life event exception to purchase coverage through the Marketplace, they can get a private plan through major health care companies. These plans are often available for only up to one year, i.e. providing coverage until a person is able to reapply through the Marketplace for long term coverage.

Please note: UHCS does not bill insurance. Students are welcome to submit their receipts to their insurance for reimbursement. The student's insurance company will determine if such claims are reimbursable



How to Choose a Plan

There are many factors to take into consideration when choosing a health insurance plan.

- Do you have any chronic conditions that require regular health care?
- Do you need specific medications?
- Would you rather pay less per month and more if you need care, or more per month and less if you need care?

As a UWW student, UHCS will be able to provide most primary care services at very low costs. Healthy students at very least should consider a catastrophic type plan in the event they may need emergency care.

As you begin to wade through plans, here are some terms that will be important to understand.

- **Premium:** The amount you will pay each month to the insurance company simply to have coverage
- **Copay:** The specific dollar amount you may be required to pay up front for a specific type of service such as prescription or doctor's visit
- **Deductible:** The amount you need to pay before your health insurance will start paying medical claims. Monthly premiums and copays do not count towards the deductible.
- **Coinsurance:** The amount you are responsible for once the insurance begins paying for medical claims, usually after the deductible has been met.
- **Out of Pocket Maximum:** The amount that you will be required to pay toward your claims in a single year. Once you have paid this amount, usually through copays, deductibles and coinsurance, the insurance company will fully cover the bills from all medical services rendered that year. The monthly premium does not count toward the out of pocket maximum.

Please see the next page for an example of two different plans



Example Plan Comparison

Plan A

Monthly Premium: \$100
Annual Deductible: \$5,000
Coinsurance: 80%
Primary doctor visit: \$0 once deductible has been met
Prescription coverage: \$0 once deductible has been met

	Plan A	
	Total Bill	Patient Responsibility
Year #1		
Went to primary doctor for a cold	\$150	\$150 (Deductible not met)
Primary doctor prescribed generic medication	\$35	\$35 (Deductible not met)
Emergency Room visit for an injury	\$2,500	\$2,500 (Deductible not met)
Premiums for the year		\$1,200
Total Medical Costs for Year #1		\$3,885
Year #2		
Overnight Hospital Stay	\$9,000	\$5,000 - Deductible \$4,000 x 20% (Coinsurance) Total: \$5,800
2 follow up doctor visits	\$150 x 2	\$0
3 prescription medications	\$50 x 3	\$0
Premiums for the year		\$1,200
Total Medical Costs for Year #2		\$7,000

Plan B

Monthly Premium: \$200
Annual Deductible: \$2,000
Coinsurance: 80%
Primary doctor visit: \$10 copay
Prescription coverage: \$5 copay for generic medication

	Plan B	
	Total Bill	Patient Responsibility
Year #1		
Went to primary doctor for a cold	\$150	\$10 Copay
Primary doctor prescribed generic medication	\$35	\$5 Copay
Emergency Room visit for an injury	\$2,500	\$2,000 - Deductible \$500 x 20% (Coinsurance) Total: \$2,100
Premiums for the year		\$2,400
Total Medical Costs for Year #1		\$4,515
Year #2		
Overnight Hospital Stay	\$9,000	\$2,000 - Deductible \$7,000 x 20% (Coinsurance) Total: \$3,400
2 follow up doctor visits	\$150 x 2	\$20 Copay
3 prescription medications	\$50 x 3	\$15 Copay
Premiums for the year		\$2,400
Total Medical Costs for Year #2		\$5,835