Dear Parent or Guardian,

Chatham University is committed to the health and well-being of the student body. For care involving the treatment of minor illnesses and injuries, the University maintains the Student Health Services Center in Woodland Hall. Beyond those basic needs, we understand that more serious medical situations and preventive care require the support of local doctors, hospitals, and urgent care facilities. All of these situations can be costly if students are not adequately insured. Treatment of even a routine medical concern could negatively impact a family’s ability to support their student’s goal of a college education.

In addition, the University mandates that all full-time students have health insurance coverage. The University partners with UPMC Health Plan to provide students with in-network coverage at the UPMC medical facilities closest to the campus. This Student Health Insurance is not only affordable and easy to use, but also includes:

- Preventive care
- Coverage for all types of injuries, including sports and exercise injuries
- MyHealth, an online health promotion program
- eBenefits for online management
- Out-of-area coverage while traveling

We encourage you to please review the enclosed information outlining the Student Health Insurance Plan to determine if the coverage offered to Chatham students meets the needs of your family. The open enrollment/waiver period for the 2013-2014 academic year begins July 1, 2013. We will be asking your student to make an election through our online system to either enroll in or waive this coverage, if they have alternative coverage. A more extensive brochure addressing the Student Health Insurance Plan is being mailed to your student’s attention.

Any student who would like to enroll in the Student Health Insurance Plan may do so by accessing the “Student Health Insurance” link on myCHATHAM and completing the online enrollment process. Health insurance cards will be mailed to all enrolled students following the completion of this process. Students who complete enrollment prior to Friday, July 12, 2013 will have cards issued to them no later than August 1, 2013 (the effective date of coverage).

A pending charge for the health insurance premium will be placed on the student account upon registration at full-time status. If the student has alternate coverage and completes the online waiver by the waiver deadline of September 4, 2013, an offsetting credit will be posted to the student account. **Any full-time student who does not complete the waiver process by September 4, 2013, will automatically be enrolled in the Chatham Student Health Insurance Plan, and will be responsible for all premium amounts charged to their student account.**

Please discuss this information with your student so that they are prepared to make the necessary choices in order to fulfill the University’s requirement regarding mandatory health insurance coverage.

Student Health Services  Student Counseling Services  Student Accounts Office
Woodland Hall  Woodland Hall  Braun Hall
412-365-1238  412-365-2973  412-365-2719
# Table of Contents

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Chatham University and UPMC Health Plan

Don’t worry. You’re covered.
College — an exciting period in every student’s life, filled with many new things: classes, books, residence halls, friends …

With so much to think about, wouldn’t it be nice to be free from worry about how to find and pay for health care if you or a dependent becomes sick or injured?

UPMC Health Plan and Chatham University have you covered.

With UPMC Health Plan, you get world-class physicians when you are sick, and health promotion programs to keep you well. These programs are specifically designed to meet the physical and emotional needs of college students — and they are delivered and managed right here in western Pennsylvania, by people who know the region’s health care resources and systems.

That means you’re free to concentrate on your education. And, after all, isn’t that why you’re in college?

Chatham University Student Health Services

As a student, you have access to the following valuable services from Chatham University Student Health Services. These services are supported by your tuition and fees:
• First aid intervention
• Illness and injury assessment
• Starter doses of over-the-counter medications
• Various health screenings
  † Blood pressure checks
  † Height and weight measurements
  † Community health referrals
• Updating and maintaining student health and immunization records
• Health education resource materials

To ensure students’ health needs are met, the University has partnered with a hospital-affiliated health care facility to provide comprehensive medical services to Chatham University students.

Student Health Services provides the following services at no charge:
• Nurse office visits
• Confidential psychological counseling services

Additional services may result in a small fee due at the time of service or charged to your student account.

Contact Information

Student Health Services
Woodland Hall
Phone: 412-365-1238

Student Counseling Services
Woodland Hall
Phone: 412-365-2973
Your Health Is Our #1 Priority

UPMC Health Plan’s Student Health Plan is designed to complement your Chatham University Student Health Services and Student Counseling Services offering. UPMC Health Plan can cover the more extensive medical treatment or emergency care that you may require during your student years. See pages 10, 11, and 12 for the full range of UPMC Health Plan covered services.

As part of an integrated health care delivery system, UPMC Health Plan includes more than 135 hospitals and more than 11,500 physicians. We make it our responsibility to help each of our student members enjoy the best quality of life and health possible. Through the many primary care physicians and specialists in our outstanding provider network, we help our members to remain healthy and detect any medical problems at an early stage, when treatment is more effective and may prevent such problems from escalating into serious illness.

If your doctor does not participate in the UPMC Health Plan network, you are still covered. Your student health insurance plan gives you the freedom to see out-of-network providers for slightly more than the cost of seeing a participating provider.

Out-of-area students who go home for extended visits and students who travel within the U.S. can use the physicians and facilities of UPMC Health Plan’s contracted national network, which includes more than 500,000 physicians and nearly 5,000 facilities.

Select a physician online
www.upmchealthplan.com
Travel Assistance Program

Peace of mind wherever you roam
UPMC Health Plan includes travel assistance services through Assist America® at no additional charge. Assist America provides emergency medical services for students studying abroad or students traveling more than 100 miles from their campus address or from their permanent home address.

If you need help away from home, Assist America can locate qualified doctors and hospitals, replace forgotten prescriptions, provide emergency medical evacuation, or arrange transportation so that family members can be with injured relatives.

We recommend that you review this coverage prior to traveling.

assist america®

Pharmacy

Prescription drug coverage you need, where you need it
Your student health benefits through UPMC Health Plan include prescription drug coverage that allows you and your doctors to choose the most effective pharmaceutical regimen — one that will help you manage your prescription drug costs and also allows freedom of choice.

And when you’re traveling outside your neighborhood, you can now take advantage of more than 30,000 pharmacies nationwide. Your student health insurance allows you to fill prescriptions at any of the following facilities throughout western Pennsylvania that participate in UPMC Health Plan’s retail pharmacy network.

- CVS/pharmacy
- Giant Eagle
- Kmart
- Rite Aid
- Sam’s Club
- Target
- Walmart
- Hundreds of independent pharmacies

You may also call UPMC Health Plan at 1-888-876-2756 or go to www.upmchealthplan.com to find a pharmacy near you.

Our pharmacy program offers you a variety of high-quality, effective generic and brand-name drugs. You can also take advantage of mail-order prescriptions that will arrive at your door and can be ordered in 90-day supplies. Please refer to the benefit summary on pages 10 and 11 for actual deductibles, coinsurance, and copayment amounts.
MyHealth OnLine

24/7 access to health information and health improvement tools
All Chatham University students enrolled in UPMC Health Plan have access to MyHealth OnLine, an easy-to-use Internet-based member service center.

When you log in to MyHealth OnLine, you unlock a free, confidential resource that can be personalized just for you. Here you can investigate health symptoms and read the latest news in the extensive library of health-oriented information.

Interactive features help you devise personal action plans from getting in shape to quitting tobacco. MyHealth OnLine also offers Web-based health trackers to guide you through eating better by logging what you eat each day, your activity level, and your weight.

In addition, MyHealth OnLine lets you:
- View detailed information about your health insurance benefits and covered services
- Access your Explanation of Benefits (EOB)
- Search for physicians and other health care providers
- Request new ID cards
- Estimate cost of care
- Order and refill prescriptions
- Access MyHealth tools and information

All of these resources make MyHealth OnLine a great tool to help manage your health information and determine what health improvements may be right for you. To access these tools, log in to MyHealth OnLine.

To access MyHealth OnLine:
- Go to www.upmchealthplan.com.
- Enter your username and password in the Member Login box.
- Click on desired topics.
Commonly Used Terms

**Copayment** — A specific, agreed-upon dollar amount that a patient pays to the provider when receiving services or supplies.

**Dependent** — A spouse or domestic partner or a child under 26 years of age.

**In-Network Services** — Services performed by physicians who have a contract or agreement with UPMC Health Plan to provide specific services for a specific fee.

**Mail-Order Prescription Drugs** — Medications that can be ordered in a three-month or 90-day supply for a reduced copayment.

**Non-Participating Provider** — A provider that has not contracted with UPMC Health Plan to provide services at a reduced fee.

**Out-of-Network Services** — Health care services received outside the designated PPO network. Benefits are paid at a lower level after the annual deductible is met. Members may also have to pay the difference between the provider’s charge and the UPMC Health Plan payment.

**Participating Provider** — A provider that has contracted with UPMC Health Plan to provide medical services to covered persons. The provider may be a hospital or other facility, a physician, or a pharmacy that has contractually accepted the terms and conditions as set forth by the Health Plan.

**Preferred Provider Organization (PPO)** — An arrangement between a group of doctors or providers and another entity, such as an employer or other group. This arrangement makes it possible for price discounts on services in exchange for a higher volume of patients.

**Specialty Prescription Drugs** — Specialty medications are used to treat complex clinical conditions and are limited to a 31-day supply. Most specialty medications must be obtained through our designated specialty provider, which provides convenient and expedited delivery through the mail.
Frequently Asked Questions

GENERAL INFORMATION

Does Chatham University require that I have this insurance?
Chatham University requires that all full-time students carry U.S.-based health insurance. Students must either:

- Enroll in the Chatham University Student Health Plan;
- Choose to remain on their parent’s insurance policy; OR
- Purchase a separate policy of their choosing.

If not enrolled in the Chatham University Student Health Plan, students must provide proof of other coverage through the online waiver process. If the online waiver process is not completed, the student will, by default, be enrolled in the Chatham University Student Health Plan.

Does Chatham University’s Student Health Services accept this insurance?
No. Currently, Student Health Services does not accept the Student Health Plan or any other type of insurance coverage. In order to keep overhead costs of operating the Student Health Services low, the nominal fees charged for services are not submitted to insurance providers by Chatham. Student Health Services fees may be charged to your University Student Account if you are unable to make payment at the time of service.

What if I only take classes online?
The University believes it is in the best interest of all full-time students to carry sufficient health insurance coverage. Full-time online students must complete the waiver process or be automatically enrolled in the Chatham University Student Health Plan.

When will my coverage become effective?
Coverage will be effective on August 1, 2013, for students who voluntarily enroll or are enrolled by default.
What if I have more questions about coverage?
Call UPMC Health Plan at 1-888-876-2756 to talk to a Health Care Concierge, or chat with us online at www.upmchealthplan.com.

What is the period of coverage?
The Chatham University Student Health Plan defines its benefit year as August 1, 2013, to July 31, 2014. An opportunity to enroll in the middle of the benefit year occurs with the spring semester and covers the period from January 1, 2014, to July 31, 2014.

What is open enrollment and when does it occur?
Open enrollment is the period during which a student may enroll for coverage. Students enrolling for the fall semester have until September 4, 2013, to enroll for health care coverage. Students who are not eligible for the fall semester but who become eligible for the spring semester may enroll during the period that ends January 13, 2014.

ELIGIBILITY

Who is considered an eligible student?
All registered students are eligible for coverage under the Chatham University Student Health Plan with UPMC Health Plan. Eligible students who enroll may also insure their dependents. Eligible dependents include the spouse or domestic partner and any children under 26 years of age.

Full-time undergraduate students (taking 12 or more credits in one 14-week semester) and full-time graduate students (taking 9 or more credits in one 14-week semester) are required to carry health insurance coverage. If proof of alternate coverage is not provided in the online waiver process, students will be enrolled by default in the Chatham University Student Health Plan.

What if I am not eligible by August 1, 2013, but become eligible for the spring semester?
A student who becomes eligible for the spring semester can enroll any time during the open enrollment period between December 1, 2013, and January 13, 2014. The effective date of coverage for this open enrollment period is January 1, 2014.

What happens if I graduate or withdraw from the University before the spring semester?
Coverage for students who are not enrolled for credit in the spring semester will terminate December 31, 2013.
DEPENDENT COVERAGE

Is there a “family deductible” in this student benefit plan?
Yes, there is a family deductible when dependents are covered on the plan. Each individual family member is only responsible for the individual level of the deductible and cannot satisfy the entire family deductible. Once the family level deductible is cumulatively satisfied, all family members will follow the plan copayments and coinsurance benefit levels.

Can I add a newborn child to my coverage?
Yes. Your newborn will automatically be covered by UPMC Health Plan for 31 days from the date of birth. Unless you call the Health Plan at 1-888-876-2756 to enroll your son or daughter within this 31-day period, your child will lose coverage on the 32nd day following birth. Likewise, a child legally placed with a covered student for adoption or a legally adopted child of a covered student will automatically be covered for 31 days from the date of placement. The covered student must call the Health Plan within 31 days of placement for the coverage to continue. In all of these instances, your premium may be adjusted.

COVERAGE

What are some of the non-covered services?
In addition to items that are considered standard exclusions, the following is a list of non-covered services:

- Speech therapy
- Skilled nursing facility coverage
- Private duty nursing
- Durable medical equipment (corrective appliances)
- Prosthetic devices
- Podiatry services
- Chiropractic services

Where can I get a directory or list of participating providers?

What if I have been seen by a non-network physician?
Visits to non-network providers are covered at 60 percent of reasonable and customary charges after the student meets his or her deductible.
UPMC Health Plan Student Health Insurance
2013-2014 Timelines

<table>
<thead>
<tr>
<th>Term</th>
<th>Effective dates of coverage</th>
<th>Online waiver/enrollment must be completed by Add/Drop deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual term</td>
<td>8/01/2013 through 7/31/2014</td>
<td>September 4, 2013</td>
</tr>
<tr>
<td>Spring term ONLY</td>
<td>1/01/2014 through 7/31/2014</td>
<td>January 13, 2014</td>
</tr>
</tbody>
</table>

2013-2014 Premiums

<table>
<thead>
<tr>
<th>Student</th>
<th>Annual premium of $1,550</th>
<th>$1,550 charged to University student account in 2 semester installments of $775 each</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student and spouse</td>
<td>Annual Premium of $4,137</td>
<td>$1,550 charged to University student account in 2 semester installments of $775 each $2,587 due at the time of enrollment</td>
</tr>
<tr>
<td>Student and child(ren)</td>
<td>Annual Premium of $3,112.32</td>
<td>$1,550 charged to University student account in 2 semester installments of $775 each $1,562.32 due at the time of enrollment</td>
</tr>
<tr>
<td>Student, spouse, and child(ren)</td>
<td>Annual Premium of $4,313.28</td>
<td>$1,550 charged to University student account in 2 semester installments of $775 each $2,763.28 due at the time of enrollment</td>
</tr>
</tbody>
</table>

Notices to Student
No premium will be refunded other than for (a) determination of ineligibility or (b) entrance into the armed forces.

Any full-time student who does not complete the waiver process by the add/drop deadline will automatically be enrolled in the Chatham University Student Health Plan, and will be responsible for all premium amounts charged to his or her student account.

Full-time students who provide proof of alternative insurance coverage by completing the online waiver process will have an offsetting credit of $775 posted to their student account.
The Preferred Provider Organization (PPO) plan offers you the choice of two levels of health care benefits each time you need medical services. Members will have reduced cost-sharing if care is received from a participating provider. Coordination of service is not required.

### Covered Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Participating Provider</th>
<th>Non-Participating Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual deductible</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$350</td>
<td>$500</td>
</tr>
<tr>
<td>Family</td>
<td>$700</td>
<td>$1,000</td>
</tr>
<tr>
<td>Annual out-of-pocket limit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>None</td>
<td>$10,000</td>
</tr>
<tr>
<td>Family</td>
<td>None</td>
<td>$20,000</td>
</tr>
<tr>
<td>Plan payment level</td>
<td>You pay 20% after deductible¹</td>
<td>You pay 40% after deductible²</td>
</tr>
<tr>
<td>Lifetime benefit limit</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>Primary care provider (PCP) required</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Pre-existing condition limitations</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Precertification requirements</td>
<td>Provider responsibility</td>
<td>Member responsibility</td>
</tr>
</tbody>
</table>

### Provider Medical Services

#### Adult Care

- Preventive/health screening examination: Covered at 100%. You pay $0. Not Covered.
- Adult immunizations (required to be covered by PPACA): Covered at 100%. You pay $0. You pay 40% after deductible.
- Adult immunizations (not required to be covered by PPACA): You pay 20% after deductible. You pay 40% after deductible.

#### Pediatric Care

- Preventive/health screening examination: Covered at 100%. You pay $0. Not Covered.
- Pediatric immunizations: Covered at 100%. You pay $0. You pay 40% (deductible does not apply).
- Well-baby visits: Covered at 100%. You pay $0. Not Covered.

#### Women’s Care

- Screening gynecological exam and Pap test: Covered at 100%. You pay $0. You pay 40% (deductible does not apply).
- Mammograms, screening and medically necessary: Covered at 100%. You pay $0. You pay 40% after deductible.
- Provider office visit (for illness or injury): Covered at 100% after $30 copayment per visit. You pay 40% after deductible.
- Specialist office visit: Covered at 100% after $40 copayment per visit. You pay 40% after deductible.
- Medical/surgical services: You pay 20% after deductible. You pay 40% after deductible.

### Hospital Services

- Inpatient/outpatient care, medical/surgical services, ancillary services, and supplies: You pay 20% after deductible. You pay 40% after deductible.

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¹You pay 100% after deductible if you receive care from a non-participating provider.
²You pay 100% after deductible if you receive care from a non-participating provider.
<table>
<thead>
<tr>
<th>Covered Services</th>
<th>Participating Provider</th>
<th>Non-Participating Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency care coverage</td>
<td>Covered at 100% after $150 copayment per visit</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Deductible does not apply.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Copayment waived if member admitted as inpatient</td>
<td></td>
</tr>
<tr>
<td>Urgent care facility</td>
<td>Covered at 100% after $30 copayment per visit</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Diagnostic Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advanced imaging (e.g. PET, MRI, etc.)</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Other imaging (e.g. x-ray, sonogram, etc.)</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Lab and other services</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Medical Therapy Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chemotherapy, radiation, infusion therapy, dialysis treatment</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Home Infusion</td>
<td>You pay 20% after in-network deductible</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Covered up to 30 visits per Benefit Period</td>
<td></td>
</tr>
<tr>
<td>Rehabilitation Therapy Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical and occupational</td>
<td>Covered at 100% after $30 copayment per visit</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td></td>
<td>Limit of 25 visits per Benefit Period for all therapies combined</td>
<td></td>
</tr>
<tr>
<td>Speech therapy</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Other Medical Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skilled nursing facility</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Home health care</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td></td>
<td>Combined Benefit Limit of 60 visits per benefit period</td>
<td></td>
</tr>
<tr>
<td>Private duty nursing services</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Hospice care</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Therapeutic manipulation</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Podiatry care</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Allergy testing and serum</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Durable medical equipment and corrective appliances</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Fertility testing</td>
<td>Not covered</td>
<td></td>
</tr>
<tr>
<td>Respiratory therapy</td>
<td>You pay 10% after in-network deductible</td>
<td></td>
</tr>
</tbody>
</table>

more on page 12
<table>
<thead>
<tr>
<th>Covered Services</th>
<th>Participating Provider</th>
<th>Non-Participating Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Behavioral Health — Contact UPMC Health Plan Behavioral Health Services at 1-888-251-0083</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavioral health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Outpatient</td>
<td>Covered at 100% after $30 copayment per visit</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Substance abuse services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient detoxification</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Inpatient rehabilitation</td>
<td>You pay 20% after deductible</td>
<td>You pay 40% after deductible</td>
</tr>
<tr>
<td>Outpatient rehabilitation</td>
<td>Covered at 100% after $30 copayment per visit</td>
<td>You pay 40% after deductible</td>
</tr>
</tbody>
</table>

**Prescription Drug Coverage — The Your Choice pharmacy program will apply (Mandatory Generic).**

- **Retail prescription drug**
  - Prescriptions must be dispensed by a participating pharmacy
  - You pay $15 copayment for generic drugs
  - You pay $30 copayment for preferred brand drugs
  - You pay $50 copayment for non-preferred brand drugs
  - 90-day maximum retail supply available for 3 copayments

- **Specialty prescription drug**
  - Specialty medications are limited to a 30-day supply
  - Most specialty medications must be filled at our contracted specialty pharmacy provider (List available upon request)
  - You pay $50 copayment for specialty drugs
  - 30-day maximum specialty supply

- **Mail-order prescription drug**
  - A three month supply (up to 90 days) of medication may be dispensed through the contracted mail service pharmacy
  - You pay $30 copayment for generic drugs
  - You pay $60 copayment for preferred brand drugs
  - You pay $100 copayment for non-preferred brand drugs
  - 90-day maximum mail-order supply

---

1. Copayments may apply to certain services.
2. If care is out-of-network, benefits are paid at a lower level after your annual deductible is met. If you go to an out-of-network provider, you also may have to pay the difference between the provider’s charge and the UPMC Health Plan payment (reasonable and customary amount).
3. UPMC Health Plan maintains that the coverage described in this document is at all times administered in compliance with applicable laws and regulations, including, but not limited to, the Patient Protection and Affordable Care Act of 2010. If at any time any part or provision of this Statement of Benefits is in conflict with any applicable law, regulation, or other controlling authority, the requirements of that authority shall prevail.
4. For plan years beginning on or after August 1, 2012, certain additional women’s preventive services are covered with no cost sharing.
5. If the brand-name drug is dispensed instead of the generic equivalent, you must pay the copayment associated with the brand-name drug as well as the retail price difference between the brand-name drug and the generic drug.
How to Enroll in or Waive UPMC Health Plan Coverage

The interest of students is a priority, and, as a student of Chatham University, you are required to have health insurance. You must either enroll in the UPMC Health Plan insurance package, or waive it in lieu of your own coverage. Enrollment and waiver options can be completed online by accessing the myChatham homepage.

**Enrolling for Coverage with the Plan**

All full-time registered students are eligible for coverage with UPMC Health Plan. If you would like to take advantage of this opportunity, complete the online Student Health Plan Insurance enrollment by using the “Student Health Insurance” link located on the myChatham homepage before the add/drop deadline.

**WAIVING COVERAGE WITH THE PLAN**

The University requires that full-time students be automatically enrolled unless they provide proof of alternative health insurance coverage. If you plan to decline coverage, it is mandatory that you complete the Waiver of Coverage by using the “Student Health Insurance” link located on the myChatham homepage by the add/drop deadline. Failure to waive coverage by September 4, 2013 (or January 13, 2014, for the spring semester add/drop), will result in automatic enrollment in UPMC Health Plan. Students who are enrolled automatically will be responsible for all premium amounts charged to their student account.

For assistance with the online enrollment or waiver process, call UPMC Health Plan: 1-888-876-2756.

For questions about the premium charge on your student account, contact studentaccounts@chatham.edu or call 412-365-2719.
What Is EBenefits?

EBenefits is Chatham University’s student health insurance self-service website.

EBenefits allows you to view, enroll in, and make changes to your student health insurance information quickly, easily, and securely. Since this system is available 24 hours a day, 7 days a week, you can view and change information conveniently from any computer with Internet capability — from home or school.

What we need you to do in the EBenefits system beginning July 1, 2013:
• Make desired changes that will take effect on 8/1/2013.
• Add dependent information if purchasing more than individual coverage.
• Set up payments for dependent insurance via a debit/credit card.

Logging in to EBenefits for the First Time - Registration

Access EBenefits
To access the system, log into www.ebenefits.com/chatham or follow the Student Health Insurance link on myChatham.

Registration
Returning users should use the same log-in information that they used last year.

You will be directed to the EBenefits log-in page. Click on the “Click Here to Register” link to begin the registration process. You only need to register one time. Once you click on the link, the validation page will appear.

A. First-Time User Validation
You will need the following information to securely validate your identity:
Last Name, Date of Birth, and Student ID number. After this data has been entered, click on the “Next” button.

B. Registration Details
Once validation is complete, you will be directed to a page containing your user information details. In the Security Details section at the bottom of the page, you will need to create your username, password, and secret question and answer.

Then, follow these steps:

1. Create a username that is at least six characters and contains numbers and letters (e.g., janesmith09).

2. Complete the password section by entering a password and then confirming it. Please note that the password is case sensitive and must have at least six characters.

3. Create a secret question and answer, in the event that you forget your password and need to retrieve it.

4. Click on the “Submit” button to confirm your identity once the required information has been completed.

After clicking on the Submit button, you will be taken to the homepage where you can begin using the EBenefits system.

Note: Remember your username and password. You will need these each time you log in to EBenefits. They are not the same as your myChatham username and password.
Tips for Students

You won’t use what you don’t understand, and we want to make sure you understand your benefits. The following are some tips to make things easier for you.

**Familiarize yourself with the Student Health Services.**
For care involving the treatment of minor illnesses and injuries, the University maintains the Student Health Services in Woodland Hall for all students. More serious medical situations may require care beyond the capabilities of a campus health facility, and you will be directed by the Student Health Services or UPMC Health Plan.

**Transportation to off-campus health care**
Students requiring transportation to UPMC Shadyside Urgent Care can use the Chatham Shuttle by making arrangements through Student Health Services during business hours. Limited transportation will be provided after hours. The shuttle schedule will be made available. However, students can also visit Urgent Care on their own daily, 9 a.m. to 9 p.m., 365 days a year.

**Know your coverage.**
Some services — like speech therapy, podiatry services, and chiropractic services — are not covered under UPMC Health Plan. Refer to pages 10 and 11 for coverage information or contact the Health Plan at 1-888-876-2756 to find out what is covered under your benefit plan before you make an appointment. If you are using insurance other than UPMC Health Plan, make sure you know where to call for information about your benefits.

**Prior to returning to or starting at campus:**
Update your personal health record.

1. **You must have these immunizations/vaccinations required by Chatham University:**
   - Meningitis vaccine (Menactra) or a signed meningitis waiver form
   - Two MMR (Measles, Mumps, Rubella) vaccine dates
   - Three hepatitis B vaccine dates or a positive blood titre
   - PPD skin test for all international students within one year of arrival to campus

2. **Physical Exam**

3. **And, if necessary,**
   - Prescription refills
   - Gynecological exam

**Be prepared.**
When you visit a provider, make sure you know what medications you are taking and any medical conditions or allergies you may have.

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**Important Contact Information**

**Student Health Plan**
UPMC Health Plan
U.S. Steel Tower
600 Grant Street
Pittsburgh, PA 15219
1-888-876-2756
www.upmchealthplan.com

**UPMC Urgent Care**
5231 Centre Avenue
Pittsburgh, PA 15232
412-623-4114

**MedExpress Urgent Care**
5201 Baum Boulevard
Pittsburgh, PA 15224
412-687-3627
Always carry your insurance card.
Make sure you always have your insurance card with you when you see a provider. If you have applied for UPMC Health Plan and have not received your card, contact us at 1-888-876-2756.

Be assured that your privacy is our priority.
Unless you give permission, nothing that takes place at a visit with a provider will be shared with anyone else, except as permitted by law.

Questions? Call us!
If you have any questions about UPMC Health Plan, call us at 1-888-876-2756.

Utilization Management
Our role as financial and medical steward of your health care requires that UPMC Health Plan review and approve certain procedures prior to those services being completed. The Health Plan’s clinical staff will communicate with your physicians for these review processes. UPMC Health Plan’s key utilization management procedures include prior authorization, concurrent review, retrospective review, and discharge planning.

Privacy and Confidentiality
Whether you are a prospective or current member of UPMC Health Plan, we respect and protect your personal information.

That is one of your rights as a UPMC Health Plan member. You retain this right even when you are no longer a member of UPMC Health Plan.

Your name, address, Social Security number, and birth date are confidential — along with any data we have about the services that you have received or the premium that you pay.

We use your personal health and financial information only internally and with our contracted providers or agents for the purposes of your health care treatment, payment for that treatment, and the health care operations required to provide that treatment.

We do not share your personal information with Chatham University.

UPMC Health Plan complies with all aspects of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and monitors related issues.

For questions concerning the privacy and confidentiality of your personal information, or to obtain a copy of our Notice of Privacy Practices, call UPMC Health Plan at 1-888-876-2756.

For questions concerning the confidentiality of behavioral health information, please contact UPMC Health Plan Behavioral Health Services at 1-888-251-0083.

In this document, the term “UPMC Health Plan” refers to benefit plans offered by UPMC Health Network, Inc., as well as to those plans offered by UPMC Health Plan, Inc.

This managed care plan may not cover all of your health care expense. Read your contract carefully to determine which health care services are covered.

UPMC Health Plan Member Services Department: 1-888-876-2756
TTY Services: 1-800-361-2629
UPMC Health Plan

U.S. Steel Tower
600 Grant Street
Pittsburgh, PA 15219

www.upmchealthplan.com