

The Student Health Insurance Benefits Plan and Transgender Students 2017-18

I. Overview of the SHI Benefits Plan

The SHI Benefits Plan covers many services for transgender health care and transition-related care, and does so at the same level as any other diagnosis. Coverage levels for all services are shaped by provider choice, with greater coverage at certain provider locations compared to others. Students can maximize their benefits through their choices (see more below and page 2). Coverage includes medical, mental health, prescriptions, dental and vision.

FAQ	Answer
How can I tell what is covered and what's not covered?	<ul style="list-style-type: none"> ▪ Read: The Member Overview booklet and the Summary Brochures available online (see navigation at the bottom of this page). ▪ Call: HealthSmart at 844-206-0374. You can also contact or visit SHI.
What costs am I responsible for paying when I get care?	<ul style="list-style-type: none"> ▪ Depending on the type of care and the provider you see, you may owe a copay, coinsurance, or deductible. Not sure what those words mean? Use our online Terminology Translator (see navigation below). ▪ The Schedule of Benefits section at the end of the Summary Brochure also stipulates what you can expect in terms of coverage and cost.
What doctors, counselors, and facilities can I use?	<ul style="list-style-type: none"> ▪ You can choose your doctor. Your coverage is greater and your costs lower if you choose from the doctors and facilities that have agreed to work with our benefits: “Enhanced” providers at Columbus campus, and local and national “Preferred” providers. The <i>Find a Provider page on our website</i> has search tools. Be mindful of these groups when you are establishing a treatment team. ▪ If you see providers that are <i>not</i> in the Enhanced or Preferred groupings, you will pay more and your coverage may be less.
What do I need to know about prescription coverage?	Your prescription coverage is per the HealthSmartRX formulary, a specific list of medications covered and at what percentage and what minimum cost to you. You can access the formulary online.
What are UnitedHealthcare and HealthSmart?	They are two companies that partner with Ohio State to provide and administer your benefits. UnitedHealthcare StudentResources (UHCSR) issues your member ID card for medical, vision and pediatric dental. HealthSmart manages the claims for that coverage, meaning they make sure that the costs of care (e.g., bills from providers) get paid correctly. You can work with HealthSmart to get a <i>predetermination of benefits</i> that gives you an estimate of coverage for specific procedures. The predetermination is not a guarantee.
Is there a limit to how much insurance covers each year?	There are no policy year maximum benefits for medical, mental health, or prescriptions. There are maximum benefits for adult dental and adult vision.

Navigation to resources from shi.osu.edu:

- Provider Search: > ***Find a Provider***
- Member Overview, Summary Brochures, Formulary: > ***About the SHI Benefits Plan > 2017-18 Benefit Details***
 - Terminology Translator: > ***Health Insurance Literacy Tools***

More about Provider Choices:

- Your plan organizes providers of medical, vision and mental health services into four groups, with greater coverage at Tiers One and Two. Your costs increase significantly in Tiers Three and Four.

Tier	Deductible	Coverage ¹	Provider Options
One – Enhanced	None	100%	Student Health Services at the Wilce Student Health Center, Counseling and Consultation, College of Optometry Clinics and College of Dentistry Student Clinics
Two – Preferred	\$150	90%	In Franklin County: OSU Health Plan Network providers Outside Franklin County: United Healthcare Options PPO Network providers or United Behavioral Health Network providers

¹ Coverage quoted is informational only and should not be considered a determination. This is not an official policy document.

More about Prescriptions

- Coverage rates are 90% for Generic, 80% for Formulary Brand and 50% for Non-Formulary Brand or Dispense-as-Written. Minimum payments (e.g., \$10) also apply.
- You can utilize the Wilce Student Health Center Pharmacy *or* any HealthSmart RX network pharmacy (which includes most major chains as well as Equitas Health in Columbus and Dayton) and be subject only to coinsurance and copays. If you go elsewhere, you must pay full price up front and then seek reimbursement, and Formulary Brand medications will be covered at 50% rather than 80%.
- Some medications require prior authorizations, meaning your doctor must communicate with HealthSmartRX. If you take **specialty medication**, the prescription must go to Briova Specialty pharmacy and a prior authorization is required. Coverage rates are the same, but minimum payments are higher.
 - Your doctors send prescriptions directly to Briova, and then you need to contact Briova (1-800-850-9122) to arrange shipping and care. HealthSmart RX (1-800-681-6912) can provide information about specialty medications.

II. Overview of Transgender Coverage

The SHI Benefits Plan covers treatment for sexual reassignment surgery and other treatment for gender dysphoria, including counseling, hormone therapy and laboratory testing. Coverage is subject to UHCSR’s policy terms, exclusions and medical necessity criteria. Benefits are limited to one sex transformation reassignment per lifetime, with the acknowledgement that one reassignment may include several staged procedures. Routine, chronic or urgent non-transition services (e.g., a pelvic/gynecological exam for men with a transgender history) are covered as any other diagnosis as well.

The UnitedHealthcare Commercial Coverage Determination Guideline for Gender Dysphoria (Gender Identity Disorder) Treatment determines your available coverage under the SHI Benefits Plan. To access the detailed guidelines, follow this path:

- Go to www.uhcsr.com/osu
- Click on the blue Additional Info link.
- Click the Coverage Determination Guideline link.

Note: In the Gender Dysphoria Treatment sections of the UHCSR Summary Brochure available at shi.osu.edu, the phrase “based on setting where service is performed” means coverage is per standard coverage rates. For example, if you receive a laboratory procedure at a Preferred Provider location as part of a covered sexual reassignment, the plan would pay 90% per the *Laboratory Procedures* schedule specification.

III. Exclusions

Exclusions related to transgender services **include but are not limited to:**

- Treatment received outside of the United States
- Reversal of genital surgery or reversal of surgery to revise secondary sex characteristics
- Voice modification surgery
- Facial feminization surgery, including but not limited to: facial bone reduction, face “lift”, facial hair removal, and certain facial plastic reconstruction
- Suction-assisted lipoplasty of the waist
- Rhinoplasty (except if rhinoplasty criteria are met)
- Blepharoplasty (except if blepharoplasty criteria are met)
- Abdominoplasty (except if abdominoplasty criteria are met)
- Breast reduction (except if breast reduction criteria are met)
- Reproduction services including, but not limited to: sperm preservation in advance of hormone treatment or gender dysphoria surgery, cryopreservation of fertilized embryos, oocyte preservation, surrogate parenting, donor eggs, donor sperm and host uterus
- Drugs for hair loss or growth
- Drugs for sexual performance for patients that have undergone genital reconstruction.
- Drugs for cosmetic purposes.
- Voice therapy
- Transportation, meals, lodging or similar expenses

For further assistance:

- HealthSmart: 1-844-206-0374
- Ohio State Student Health Insurance:
 - 614-688-7979. *If you'd like to speak to an SHI staff person who specializes in information to support students seeking transgender services or information, please just ask and they will direct your call appropriately.*
 - Lincoln Tower, 11th floor, Room 1100. *Walk-ins are always welcome!*
 - shi.osu.edu
 - shi_info@osu.edu