Dear Enrollees of the U of M Student Health Benefit Plan (SHBP),

The Patient Protection and Affordable Care Act includes a mandate for most individuals to have “minimum essential coverage” (MEC) for themselves and their dependents or potentially make an individual responsibility payment. This letter conveys that the University of Minnesota Student Health Benefit Plan (SHBP) has made an application for and received recognition as MEC.

The Federal Center for Consumer Information & Insurance Oversight has reviewed the application made by University of Minnesota and determined that coverage under the SHBP complies with substantially all of the requirements of Title I of the Affordable Care Act that apply to non-grandfathered plans in the individual market. Therefore your coverage under the SHBP is recognized as MEC suitable to satisfy the individual coverage mandate.

This recognition as MEC and any adjustments made to provisions of the Plan Document of the SHBP during the application process are retroactive to August 22, 2015. Below is the list of SHBP Plan Document revisions made effective August 22, 2015.

The SHBP Claims Administrator, Blue Cross and Blue Shield of Minnesota (BCBSMN), has made every effort to process claims in accordance with these plan changes. However, if you believe that your claims were not processed correctly or if you did not submit an initial claim, please contact the BCBSMN Member Services Department (651-662-5004 or 1-866-870-0348) for guidance and/or have them facilitate re-processing of your claims.

Below is the web link that directs you to your respective campus in order to access the SHBP plan document, and the Summaries of Benefits and Coverage:

- Student Health Benefit Plan

Please be assured that University of Minnesota Office of Student Health Benefits (OSHB) is dedicated to continued compliance with the requirements of the Affordable Care Act and the maintenance of this high level of coverage.

Please contact the OSHB at umshbo@umn.edu if you have any questions about this information.

Sincerely,

Susann Jackson
Director of Student Health Benefits
Office of Student Health Benefits
University of Minnesota
University of Minnesota Student Health Benefit Plan (SHBP)

Plan Revisions effective August 22, 2015

Eligibility Change

- Removed coverage for domestic partnership

Dependent Child Definition

- References to support and residency removed
- Revised to cover dependents to age 26

External Appeals

- Revised language to provide a clear description of claims procedures, internal appeals and external appeals review processes
- Revised to include detailed information on how to initiate an appeal

Schedule of Benefits

- Dollar maximum removed from Home Health Care services
- Dollar maximum removed from Pediatric Vision eyewear
- Removed pre admission notification penalty of 25%
- Removed gender identity disorder treatment maximum

Rescissions

- Revised-to include the language that coverage will be cancelled retroactively relating to individuals who perform and act, practice, or omission that constitutes fraud, or unless the individual makes an intentional misrepresentation of material facts.

Essential Health Benefits and Preventive Services

- Revised - added language to include HRSA recommendations and the following USPSTF A and B Recommendations:

  Alcohol misuse: screening and counseling; Anemia screening: pregnant; Aspirin to prevent cardiovascular disease: men; Aspirin to prevent cardiovascular disease: women; Blood pressure screening in adults; BRCA risk assessment and genetic counseling/testing; Breast cancer preventive medications; Breastfeeding counseling; Dental caries prevention: infants and children up to age 5 years; Depression screening: adolescents; Depression screening: adults; Falls prevention in older adults: exercise or physical therapy; Falls prevention in older adults: vitamin D; Folic acid supplementation; Gestational diabetes mellitus screening; Healthy diet and physical activity counseling to prevent cardiovascular disease: adults with cardiovascular risk factors; Hemoglobinopathies screening: newborns; Hepatitis B screening: nonpregnant adolescents and adults; Hepatitis B screening: pregnant women; Hepatitis C virus infection screening: adults; Hypothyroidism screening: newborns; Intimate partner violence screening: women of childbearing age; Iron supplementation in children; Lung cancer screening; Obesity screening and counseling: adults; Obesity screening and counseling: children; Osteoporosis screening: women; Phenylketonuria screening: newborns; Rh incompatibility screening: first pregnancy visit; Rh incompatibility screening: 24-28 weeks' gestation; Sexually transmitted infections counseling; Skin
cancer behavioral counseling; Tobacco use counseling and interventions: nonpregnant adults; Tobacco use counseling: pregnant women; and, Tobacco use interventions: children and adolescents.

- Revised to reference HRSA recommendations for children.
- Revised to include language referencing coverage of services related to smoking cessation program and supplies, charges for over-the-counter drugs and vitamin supplements without an exception for preventive care, prescribed over-the-counter drugs such as aspirin, oral fluoride supplementation, and tobacco cessation drugs, vitamins including vitamin D, Folic Acid and Iron supplementation for certain diagnoses and/or indications at no cost sharing.

**Emergency Services**

- Revised language to no longer reference “Prior Authorization” in the notes section of emergency services coverage section.

**Preexisting Condition Exclusion**

- Revised to no longer require coverage under the Student Health Benefit Plan for six months to be eligible for transplant coverage.

**Medical Equipment and Supplies**

- Revised coverage for hearing aids to no longer limit the services to members age 18 years old and younger.

**Medical Services**

- Occupational Therapy to now include habilitative therapy.
- Physical Therapy to now include habilitative therapy.
- Speech Therapy to now include habilitative therapy.

**Prescription Drug Benefits Boynton (Twin Cities Campus only)**

- Revised language indicating a prescription received at a non Boynton Pharmacy as a result of an ER visit is reimbursed at 50%, removed ER criteria.

**Prescription Drug Benefits (other campuses)**

- Revised drug plan to a closed formulary, and to include language on how to request a formulary exception.
- Revised to include at least one drug in all categories for women’s preventive contraceptives.

**Pediatric Dental**

- Pages have been added to include a description of the pediatric dental coverage under the plan specific to each campus.
Pediatric Vision Benefits

- Key Benefit Features table under Lenses revised to also include fashion and gradient tinting, oversized glass-grey #3 prescription sunglass lenses, and low vision items up to age 19;
- Added coverage of benefits for lenses that specifically include single, bifocal, trifocal, lenticular lens powers, fashion and gradient tinting, oversized glass-grey #3 prescription sunglass lenses; polycarbonate prescription lenses with scratch resistance coating and low vision items as required by the EHB-benchmark plan;
- Revised to cover contact lenses in compliance with the MN benchmark plan up to age 19 for the treatment of the following conditions:
  - Keratoconus
  - Aphakia
  - Anisometropia
  - Aniseikonia
  - Pathological Myopia
  - Aniridia
  - Corneal Disorders
  - Post-Traumatic Disorders
  - Irregular Astigmatism

Reconstructive Surgery

- Revised to no longer require services be scheduled or initiated prior to the member turning 19.

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Office of Student Health Benefits
410 Church St. S.E.
Minneapolis, MN, 55455
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