DOMESTIC STUDENT HEALTH INSURANCE WAIVER CHECKLIST & COMPARISON CHART

Montclair State University mandates that all domestic undergraduate students enrolled in 12 or more credits, graduate students enrolled in 9 or more credits, and international students, regardless of credits, must enroll in the school-sponsored Student Health Insurance Plan (SHIP) or be covered by a comprehensive health insurance plan that is filed and approved in the U.S. and compliant with the Affordable Care Act (ACA) benefit requirements. To ensure compliance, mandated students are automatically billed for the SHIP.

If you have health insurance through another provider, it must meet the minimum requirements to qualify for a waiver. You must be able to provide verifiable proof. Foreign insurance, non-state HMOs, and travel insurance plans are not acceptable as alternative coverage as they do not meet the minimum requirements.

If you do not have coverage through another provider that meets these minimum requirements, then you enroll in the SHIP, or you will be automatically enrolled after the waiver deadline.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>School Sponsored Student Injury and Sickness Plan</th>
<th>Requirements for Alternative Coverage</th>
<th>My Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy Maximum (Per Insured Person, Per Policy Year)</td>
<td>Unlimited</td>
<td>Unlimited</td>
<td></td>
</tr>
<tr>
<td>Policy Deductible (Per Insured Person, Per Policy Year)</td>
<td>$500 in-network</td>
<td>Students need to be financially responsible for the deductible</td>
<td></td>
</tr>
<tr>
<td>Hospital inpatient Services (Includes surgery, laboratory, X-ray, ER, test, and procedures)</td>
<td>20% coinsurance in-network</td>
<td>Student needs to be financially responsible for the cost-share</td>
<td></td>
</tr>
<tr>
<td>Out-of-Pocket Maximum (Preferred Provider)</td>
<td>$7,000</td>
<td>No higher than $8,550</td>
<td></td>
</tr>
<tr>
<td>Prescription Drugs (In-Network)</td>
<td>$15/$45/$75/$100</td>
<td>Prescription drug coverage must be included</td>
<td></td>
</tr>
<tr>
<td>Mental Illness &amp; Substance Use Disorder Treatment</td>
<td>Covered as any other sickness</td>
<td>Covered as any other sickness</td>
<td></td>
</tr>
<tr>
<td>Pre-existing Conditions</td>
<td>Covered with no limitations</td>
<td>Covered with no limitations</td>
<td></td>
</tr>
<tr>
<td>The claims processing office must be U.S.-based</td>
<td>Insurance Policy is filed and approved in the U.S.</td>
<td>Insurance Policy must be filed and approved in the U.S.</td>
<td></td>
</tr>
<tr>
<td>Coverage in New Jersey, Nationwide, and while traveling outside the U.S. (Emergency-only coverage is not acceptable)</td>
<td>National PPO Provides access to comprehensive healthcare in the campus area</td>
<td>Provides access to comprehensive healthcare in the campus area</td>
<td></td>
</tr>
<tr>
<td>Coverage Period</td>
<td>8/15/20xx – 8/14/20xx (Fall)</td>
<td>The entire enrollment period of the academic year</td>
<td></td>
</tr>
<tr>
<td>Medical Emergency</td>
<td>20% co-insurance</td>
<td>Student needs to be financially responsible for the cost-share</td>
<td></td>
</tr>
<tr>
<td>Medical Evacuation / Repatriation</td>
<td>Unlimited</td>
<td>$50,000 medical evacuation/$25,000 repatriation</td>
<td></td>
</tr>
</tbody>
</table>

**This checklist is provided for reference purposes only. Students must waive/enroll through the online waiver/enrollment during the applicable open waiver/enrollment period.**

If you need assistance, please contact University Health Plans at 833-251-1705.
DOMESTIC STUDENT HEALTH INSURANCE WAIVER REQUIREMENT AFFORDABLE CARE ACT (ACA)

Montclair State University mandates that all domestic undergraduate students enrolled in 12 or more credits, graduate students enrolled in 9 or more credits, and international students, regardless of credits, must enroll in the school-sponsored Student Health Insurance Plan (SHIP) or be covered by a comprehensive Affordable Care Act (ACA) compliant health insurance plan.

AFFORDABLE CARE ACT (ACA) – WHAT YOU NEED TO KNOW

What is the Affordable Care Act (ACA)?

(A) The Patient Protection and Affordable Care Act, commonly known as the ACA, was signed into law in 2013 and provides specific requirements for health insurance, such as covering preventive care obtained at an in-network provider at no cost.

What does the ACA mean for my health insurance coverage?

(A) Under the ACA, everyone must be covered by a health insurance plan that meets specific minimum essential coverage requirements.

What is “minimum essential coverage”?

(A) An insurance plan certified by the Health Insurance Marketplace® provides essential health benefits, follows established limits on cost-sharing (like deductibles, copayments, and out-of-pocket maximum amounts), and meets other requirements under the Affordable Care Act. All qualified health plans meet the Affordable Care Act requirement for having health coverage, known as “minimum essential coverage.”

Examples of qualifying health coverage:

(This information retrieved from https://www.healthcare.gov/fees/plans-that-count-as-coverage/)

- Any health plan bought through the Health Insurance Marketplace®
- Individual health plans bought outside the Health Insurance Marketplace®, if they meet the standards for qualified health plans
- Any “grandfathered” individual insurance plan you’ve had since March 23, 2010, or earlier
- Any job-based plan, including retiree plans and COBRA coverage
- Medicare Part A or Part C (but Part B coverage by itself doesn’t qualify)
- Most Medicaid coverage, except for limited coverage plans
- The Children’s Health Insurance Program (CHIP)
- Coverage under a parent’s plan
- Most student health plans (check with your school to see if the plan counts as qualifying health coverage)
- Health coverage for Peace Corps volunteers
- Certain types of veterans’ health coverage through the Department of Veterans Affairs
- Most TRICARE plans
- Department of Defense Nonappropriated Fund Health Benefits Program
- Refugee Medical Assistance
- State high-risk pools for plan or policy years that started on or before December 31, 2014 (check with your high-risk pool plan to see if it counts as qualifying health coverage)

See a more detailed list of types of plans that do and don’t count as qualifying health coverage from the IRS.