



2018-2019

FREQUENTLY ASKED QUESTIONS (FAQ)

LOGOS Evangelical Seminary

International Student Insurance Plan

Why do I need health insurance?

Medical care in the U.S. is expensive and complicated. There is no free medical care. A typical doctor visit averages \$150, and an overnight hospital stay can cost thousands of dollars. When an unforeseen accident or illness occurs, it is important that you have insurance to help cover these high costs. When used in accordance with the guidelines, the insurance policy provided by your school is designed to cover 100% of the cost (after deductible and copays) of necessary medical treatment as well as medications.

We know the health care system in the United States may be very different from what you are used to, so please call Relation Insurance Services with any questions you might have at **(800) 537-1777** (Monday-Friday, 8:00 a.m. to 5:00 p.m. Pacific Time).

How do I enroll? Can I enroll my dependents?

You are automatically enrolled through your school; no action is needed to enroll yourself in the plan.

Dependent coverage is not available.

For questions about enrollment, contact Relation at **(800) 537-1777** (Monday-Friday, 8:00 a.m. to 5:00 p.m. Pacific Time).

How do I get my Insurance ID card?

After you are enrolled in the plan, you may download your insurance ID card from www.4studenthealth.com/logos. If you go to a doctor's office, urgent care center, hospital, or pharmacy, you will be asked for your ID card. Carry your insurance identification card with you at all times.

What should I do if I need to see a doctor?

You may choose any Physician or Hospital; however, using providers that are part of the PPO network may decrease your share of the costs. The PPO network for this plan is First Health Network. For a complete listing of the PPO physicians, hospitals, or other facilities, visit www.firsthealthlbp.com or call **(800) 226-5116**.

What if it is an emergency, such as an accident or life-threatening situation?

In the case of an emergency go to the nearest hospital or call **911**. You may receive treatment at any hospital. There is a \$100 deductible per sickness or injury. Each emergency room visit has a \$250 copay per visit (waived if admitted to hospital).

What if it is not an emergency, but the doctor's office is closed?

If it is *not* a life-threatening condition but you need to see a doctor right away and cannot wait for a scheduled appointment, visit an urgent care center rather than a hospital emergency room. Hospital emergency rooms generally charge more for services than doctors' offices or urgent care centers. **Using an urgent care center instead of a hospital emergency room will save you money.** Urgent care centers provide medical treatment for sicknesses and minor injuries or when immediate care is needed.

Coverage is 100% after deductible when you visit an urgent care center.

The following urgent care centers are part of the PPO network:

US Healthworks Medical Group
9350 Flair Drive, Suite 102
El Monte, CA 91731
(626) 407-0300

Regal Medical Group
117 East Live Oak Avenue, Suite 101
Arcadia, CA 91006
(626) 446-8492

Universal Industrial Care
16025 Gale Avenue, Suite B10
City of Industry, CA 91745
(626) 336-6652

What does "in-network" or "PPO" mean?

"In-network" or "PPO" means that the doctor or medical facility is part of the Preferred Provider Organization. It is a network of doctors, specialists, and hospitals that accept this insurance plan. All participating providers listed on the website www.firsthealthlbp.com are available to you for consultation and treatment. Check with the doctor or medical facility directly to confirm that they are still participating in the network before you receive treatment.

How much do I have to pay?

After you are enrolled in the plan, the insurance will pay for most covered treatment and services, but you will be required to pay a \$100 deductible per sickness or injury. Each emergency room visit has a \$250 copay per visit (waived if admitted to hospital). And prescriptions have a \$10 copay for generic drugs and a \$20 copay for brand-name drugs (no deductible).

Note that you will be responsible for any charges you incur for treatment or services that are *excluded* or *limited* under this plan, so please read the plan brochure carefully before seeking treatment.

How do I find a PPO doctor?

1. Go to www.firsthealthlbp.com
2. From the “**Locate a Provider**” screen, select “**Start Now.**”
3. Select the type of provider, such as physician or urgent care.
4. Select Search by ZIP code and enter your ZIP code.
5. Select the distance you are willing to travel to the provider (minimum of five [5] miles).
6. Click “**Search Now.**”

Always check with the doctor or medical facility directly to confirm that they accept First Health Network before you receive treatment.

It is best to locate an in-network doctor, urgent care center, and emergency room near you before you get sick.

What do I need to bring with me for a scheduled visit with a doctor or hospital?

Always bring your insurance ID card and photo identification. In addition, be sure to bring cash or a credit card to pay your deductible directly to the provider.

Does the plan cover preventive care?

Yes, this plan covers recommended immunizations and routine physical exams at 100%, with no deductible.

Are prescription drugs covered?

Yes, outpatient prescriptions are covered: generic drugs for a \$10 copay and brand-name drugs for a \$20 copay, no deductible. You should always ask for the generic form (not brand name) of the drug, if available, as this will decrease the cost. You may use any pharmacy, including CVS, Rite Aid, and Walgreens.

Is vision or dental coverage provided under this plan?

General vision and dental benefits are not provided by this student insurance plan. Please contact Relation at **(800) 537-1777** or visit www.4studenthealth.com/supplemental-plans for details on other options.

Where do I send my bills, claims, or any other important information?

If you are billed for medical services (not including your deductible), you must send copies of the bills to the claims department. The claims department may require further information to process your claim; send such information as soon as possible so there will be no delay in processing your claim. Send your copies and claims to the following address:

**Relation Insurance Administrators
P.O. Box 6040
Agoura Hills, CA 91376-6040**

To check the status of your claim, you may contact Relation Insurance Administrators by calling **(800) 468-4343**. You may request a representative who speaks your native language, if needed.

What if I pay for services such as doctor visits or prescriptions?

If you have paid for a prescription or a doctor or hospital visit (other than copays and deductible), you will need to submit a claim form for reimbursement. Download a claim form at www.4studenthealth.com/logos, fill it out completely, and then send completed claim form and receipts to the claim department address. Always keep copies of claim documents for your records.

What if I’m outside California or the United States and need medical treatment?

Any treatment received outside California is covered at 100% after the deductible. Expenses for treatment received in your home country are not covered. All medical bills, receipts, and other information should be sent to the claims department address.

What if my visa status changes?

If your visa status changes, you are no longer eligible for coverage under this insurance plan. Your coverage will be terminated. If you have not used the insurance and you are returning to your home country, you may request a refund from the school for the number of full months remaining in the term.

Am I still eligible for coverage if I graduate and go on an Optional Practical Training work permit?

Yes, you are still eligible, but you cannot enroll through the school. You must contact Relation at **(800) 537-1777** to obtain an enrollment form. In addition, students who are on Optional Practical Training must provide a Verification of Practical Training Letter to be eligible for this insurance coverage and must purchase OPT coverage within 30 days of the expiration date of their prior coverage.

Where can I find additional information on the plan?

Visit www.4studenthealth.com/logos. There you can review your insurance plan benefits and coverage dates, download claim forms and instructions for filing a claim, search for a doctor, and much more!