WITH UC SHIP, GETTING HEALTH CARE IS EASY!

1. START YOUR CARE AT SHS
   If you need health care, visit your SHS first, right on campus. Make an appointment with a primary care clinician.

2. NEED A REFERRAL?
   Your SHS clinician will provide you with a REFERRAL to obtain care off campus when needed. UCH does not require REFERRALS during the summer and school holidays.

3. KEEP YOUR COSTS LOW
   For the highest benefits, select UC Family providers at UCSF Medical Center or other UC facilities and professional providers. Or select other Anthem Blue Cross providers for in-network benefits.

4. SHS STAFF CAN HELP
   If you have questions, your SHS Staff can assist you. You can also call Anthem Blue Cross Customer Service (866) 940-8306 or login to www.anthem.com/ca

EXCEPTION
RUSH TO EMERGENCY CARE
NO REFERRAL needed for emergency care or urgent care clinic visits.

SHS: Student Health Services on campus
www.ucop.edu/ucship
CONVENIENT, AFFORDABLE, CARING

UC SHIP specializes in you and your health

You have come to UC Hastings to learn and grow. A healthy lifestyle is far easier for you when your Student Health Services (SHS) is right on campus and outstanding health care is affordable.

We all know how expensive health care can be. UC SHIP was developed to protect you from unexpected health care costs that could create a financial barrier to your graduation. UC makes no profit from UC SHIP—it’s financed by students, for students—and every year we do our best to improve the plan.

Beginning this year, as a member of our UC family you can receive specialty care at low student rates at UC’s five nationally ranked medical centers. We’re proud that we can provide you with this exceptionally valuable benefit so that you’ll have fewer personal and financial worries if you ever become ill or get injured.

We’ve also increased coverage of psycho-educational testing for those who may need learning accommodations to a $3,000 lifetime maximum. This is a benefit few, if any, other health plans offer.

And this year, if you become ill or injured, UC SHIP will step in to pay 100% of your costs sooner because we now count deductibles, coinsurance, medical copays and prescription copays toward your annual out-of-pocket maximum. This is an example, along with expanded coverage of clinical trials and genetic testing, of how students continue to benefit from our decision to incorporate Affordable Care Act provisions into UC SHIP.

You can find the details of your UC SHIP coverage anywhere and anytime at www.ucop.edu/ucship. We’re here to help you keep a healthy focus and do great work this year. Enjoy the security of knowing that you will receive care from the distinguished health care providers in our UC family, with less worry about how much it will cost.
FAQS

How do I enroll in UC SHIP?
All full-time registered students, including registered international students, are automatically enrolled in UC SHIP and charged a health insurance premium on their registration bill unless they successfully waive coverage. Students covered under UC SHIP may elect to cover their eligible dependents. For more information, including an explanation of how to waive coverage, see the section of this brochure called, “Keep track of your eligibility.”

What kinds of care does SHS offer?
SHS is an outpatient health center that provides on-campus primary and preventive care.
YOUR UC SHIP MEDICAL COVERAGE AT A GLANCE

1. Automatic coverage to make health and well-being affordable for all registered students, with option for waiver.

2. Makes it possible for you to enjoy your lowest-cost care within your UC Family:
   » On campus at SHS;
   » Locally at one of the country’s best hospitals, UCSF Medical Center, its facilities and professional providers; or
   » Any of UC’s four additional nationally ranked medical centers.

3. Considers SHS your health home for convenient outpatient services, including free comprehensive preventive care and referrals to receive non-emergency care outside of SHS.

4. Uses SHS as your source of referrals authorizing coverage for non-emergency medical care outside of the SHS. During summer months and breaks when the SHS is closed, obtain referrals from a primary care clinician in the Anthem Blue Cross PPO Prudent Buyer network.

5. When you start with a referral, you can choose from all other health care providers, whether in or out of the Anthem Blue Cross network, and receive UC SHIP coverage. Keep in mind that using UC Family or other Anthem Blue Cross in-network providers will save you money.

6. UC SHIP members have coverage for emergency and authorized non-emergency medical care 24/7 anywhere in the world.

For more information on UC SHIP, visit www.ucop.edu/ucship
Make the most of your benefits

Be sure to qualify for UC SHIP coverage by obtaining a referral if you need non-emergency care outside SHS. Then make the choice to pay less out of your own pocket toward your care by using in-network providers, as shown below.

<table>
<thead>
<tr>
<th>In-Network</th>
<th>Out-of-Network</th>
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<tbody>
<tr>
<td><strong>START AT STUDENT HEALTH SERVICES (SHS) FOR YOUR PRIMARY MEDICAL &amp; PREVENTIVE CARE</strong></td>
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<tr>
<td><strong>OBTAIN A REFERRAL FROM SHS IF YOU NEED NON-EMERGENCY CARE OUTSIDE SHS</strong></td>
<td><strong>Choose the provider and your share of the costs</strong></td>
</tr>
<tr>
<td>UC Family</td>
<td>Anthem Blue Cross PPO</td>
</tr>
<tr>
<td>UCSF Medical Center or any of the other UC medical centers and their affiliated facilities and professional groups</td>
<td>Providers and facilities that are members of the Anthem Blue Cross PPO Prudent Buyer network</td>
</tr>
</tbody>
</table>

**Benefit Year Deductible**

The amount you pay before UC SHIP begins paying for services

| $0 | $200 | $500 |

**Your Share of Total Costs for Care**

| $ | $$ | $$$$ |

**IF YOU HAVE AN EMERGENCY, SHS REFERRALS ARE NOT REQUIRED**

Call 911 or report directly to the emergency department of the nearest hospital or an urgent care clinic

*Anthem Blue Cross makes the sole and final determination as to whether services were rendered in connection with an emergency*

UC medical center providers are members of the Anthem Blue Cross PPO Prudent Buyer network, but have agreed to offer their services to UC SHIP members at a lower rate.

**You’ll find a more detailed coverage chart in Section 3: Healthy User Guide.**
WELCOME TO YOUR HEALTH HOME
INFO YOU’LL FIND IN THIS SECTION

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FAQS

How long am I covered with UC SHIP?
Coverage usually begins at fall term enrollment and continues through the summer until the next fall term begins. There is no gap in coverage during term breaks.

Do I need to be covered by UC SHIP to use SHS?
No. All registered students can use SHS, no matter what kind of medical insurance they have.
YOUR HEALTH HOME IS SHS

SHS is an outpatient health center that provides on-campus medical, behavioral health and preventive care. SHS is staffed by board-certified physicians, certified nurse practitioners, physician assistants and nurses who are experts in student health needs.

SHS clinicians provide primary care for UC SHIP members and coordinate any needed additional care. All registered students may use the services of SHS, regardless of what type of medical insurance they have. SHS does not directly bill insurance plans other than UC SHIP.

Students who waive UC SHIP enrollment are responsible for payment of SHS fees, if any. Visit the SHS website at www.uchastings.edu/about/admin-offices/health-services/ for more information on available services and fees.

YOU ARE AUTOMATICALLY ENROLLED IN UC SHIP

The University of California requires all students to have major medical insurance. It provides UC SHIP to meet this requirement. UC SHIP is a major medical, behavioral health, pharmacy, dental and vision care plan. It covers hospitalization, off-campus or out-of-area care while traveling, and some specialty services not available at SHS.

All registered students, including registered international students, are automatically enrolled in UC SHIP and charged a health insurance premium on their registration bill, except those who successfully waive coverage because their health insurance meets the university’s insurance requirements.

YOU CAN MAKE CHOICES ABOUT YOUR COVERAGE

The mandatory plan at UC Hastings includes medical, behavioral health, pharmacy, dental and vision coverage.

Students who have private health insurance or are covered by a Covered California plan may apply to waive enrollment in UC SHIP. However, the plan must satisfy the criteria for required health care coverage established by the University of California.
Most students keep their UC SHIP enrollment because it is a comprehensive and affordable plan with excellent benefits. As long as students are registered at the University of California, UC SHIP covers them 12 months a year anywhere in the world and offers UC Family low-cost care at our five nationally ranked medical centers when they receive an SHS referral.

**HOW SHS AND UC SHIP WORK TOGETHER**

SHS and UC SHIP work together to provide comprehensive medical care that addresses the diverse, individual needs of our students. SHS is a convenient health home where care and UC SHIP coverage are handled seamlessly.

SHS manages the claims submissions for services provided at SHS for students covered by UC SHIP. SHS has insurance experts to work with students who have more complex medical needs.

When you are covered by UC SHIP, you must first seek non-emergency medical care at SHS by meeting with your primary care clinician. If you need to see a specialist, SHS clinicians will issue referrals for care outside of SHS. The health services staff will help you find in-network providers from the Anthem Blue Cross Prudent Buyer network, including UCSF Medical Center and other UC medical centers, so you can pay lower out-of-pocket fees.

During summer months and breaks when SHS is closed, contact a primary care clinician from the UCSF Medical Center or another Anthem Blue Cross PPO Prudent Buyer network provider if you need a referral to a specialist. Your costs will be lower if you visit a UC medical center provider. See “How to Get in Touch” at the end of this brochure for information on how to contact Anthem Blue Cross Customer Service for assistance locating a primary care clinician outside SHS.

**HOW LONG COVERAGE LASTS**

Coverage usually begins when fall classes start and continues through the summer until the next fall term begins. Your coverage premiums are paid with your tuition bill for each semester in the school year.
EVERY STUDENT SHOULD HAVE A PRIMARY CARE CLINICIAN

An ongoing relationship with a primary care clinician is as important to your total health as exercise. The relationship will help ensure that your unique health care needs get close attention. Make an appointment early in your first year on campus so you can select a provider and receive care and guidance that are tailored to your health history.

YOU NEED A REFERRAL TO HAVE UC SHIP PAY YOUR MEDICAL BENEFITS

Care received in an emergency department or at an urgent care clinic does not require a referral from SHS, but the cost will not be covered unless Anthem Blue Cross determines services were rendered in connection with an emergency or urgent medical condition. If you access non-emergency medical services outside the SHS without a referral during a school term when the SHS is open, your costs will not be covered.

Also, keep in mind that if you are covered by UC SHIP, you can access dental and vision providers without receiving a referral.

IF YOU GO TO A PROVIDER WITH A REFERRAL

Obtain referrals for care outside of SHS. Don’t skip this step. If you access other medical services outside SHS without a referral, your costs will not be covered.

You can request a referral from your primary care physician at SHS during school terms or from your primary care clinician in the Anthem Blue Cross Prudent Buyer network during term breaks and the summer. See “How to Get in Touch” at the end of this brochure for information on how to contact Anthem Blue Cross Customer Service for assistance locating a primary care clinician outside SHS.

The referral you receive will be bound by visit limits and/or time limits. They define your period of eligibility for UC SHIP coverage for this care. You can request a new or extended referral if you need additional care.

When you choose the provider to whom you will take your referral, work with SHS or Anthem Blue Cross to look for options that will give you the lowest possible out-of-pocket cost. For example, you can receive care
This brochure provides a brief summary of UC SHIP benefit information at UCSF Medical Center at low UC Family rates. You’ll pay no deductible and receive higher coinsurance than you would if you used other in-network providers. In comparison, you could choose out-of-network physicians, but your costs will be higher and you will have to handle your own claims paperwork since you aren’t using an Anthem Blue Cross provider.

CARE MUST BE CONSIDERED MEDICALLY NECESSARY

In order to be considered a covered expense under UC SHIP, all services must be deemed medically necessary by Anthem Blue Cross. Things they take into account when they assess medical necessity include, for example, whether the care follows generally accepted medical practices, whether it is safe and effective, and whether it is required for diagnosis and treatment.

YOU CAN COVER DEPENDENTS

UC SHIP offers UC Hastings students a valuable coverage option. If you are covered under UC SHIP, you can enroll eligible dependents for medical, pharmacy, dental and vision care coverage within 31 days of the beginning of each coverage period. Dependents have a separate medical plan, plus the same dental and vision care plans that UC Hastings students have. A UC Family discount may apply if covered dependents receive health care at one of the five UC medical centers. Find a full list of covered services for dependents at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar and click on “Description of Benefits” to find the “Benefit Booklet.” Students can enroll eligible dependents by contacting Wells Fargo Insurance Services at (800) 853-5899.

DENTAL AND VISION COVERAGE, TOO

The mandatory plan for UC Hastings students includes dental and vision coverage. Descriptions of these plans can be found in a later section of this brochure.
KEEP TRACK OF YOUR ELIGIBILITY
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FAQS

How and when am I charged for care at SHS?
Students pay the portion of charges for which they are responsible, if any, at the time of service.

I’m graduating. When does my coverage end?
Your coverage ends with your final academic term (or at the end of the summer if you graduate in the spring term). You may purchase UC SHIP for one additional term if you were covered under UC SHIP during your final academic term.

IF YOU ARE A REGISTERED STUDENT

All registered full-time students, including registered international students, who are automatically enrolled in UC SHIP are charged a health insurance premium on their registration bill. The mandatory program includes medical, pharmacy, dental and vision coverage.

REGISTERED STUDENTS WHO WAIVE COVERAGE

You may provide evidence of health coverage through another plan, including a Covered California plan with an effective date prior to the UC SHIP coverage date, and apply to waive enrollment in UC SHIP. Recognize that your coverage must meet the benefit criteria established by the University of California to enable you to qualify for a waiver.

Waiver applications are completed online during the fall semester waiver period. Visit the SHS website at www.uchastings.edu/about/admin-offices/health-services/index.php and select “Insurance Benefits.” You’ll find a link for “Insurance Waiver” where you can view waiver deadlines and complete the online waiver application. Registered students will be automatically enrolled in UC SHIP if a waiver application is not submitted by the deadline.
FAQS

Do I have to waive coverage every fall?
Yes. The fall semester waiver is good for one academic year. A new waiver must be completed again during the fall waiver period prior to each academic year that the student is registered.

Are waivers available in the spring term?
Yes. A student who waived UC SHIP enrollment in the fall does not need to complete another waiver application in the spring term. However, a spring waiver is available for students registering for the first time in the spring or who did not waive enrollment in a prior term but want to waive for the spring term. A spring waiver is valid through the end of the summer.

How do I pay for care at SHS if I waive UC SHIP?
All enrolled students are eligible to use SHS. Most services provided by SHS are fully covered by the mandatory health services fee paid by all UC Hastings students.

WHEN YOU GRADUATE OR IF YOU ARE NO LONGER REGISTERED

If you are graduating from UC Hastings or if you are losing UC SHIP eligibility because you are no longer a registered student, it is important to plan ahead for continuing health coverage.

Students graduating from UC Hastings may purchase UC SHIP for one additional semester after coverage ends if they were enrolled in the plan during their final academic term. You must call Wells Fargo Insurance Services before the additional semester begins at (800) 853-5899 to purchase coverage for that time period.

Once your UC SHIP coverage is terminated, you have other coverage choices. Before graduation, contact SHS for help determining which of these options will best fit your needs. Or find UC SHIP online at www.ucop.edu/ucship. Then click on “Health Insurance after UC SHIP” at the bottom of the right-hand column to review the insurance options available to you when your UC SHIP coverage ends.
PERIODS OF COVERAGE

The periods of coverage follow the semesters scheduled for your school year. This is the schedule we will use to bill you for coverage during the year.

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<thead>
<tr>
<th>Term</th>
<th>Effective Date</th>
<th>Termination Date</th>
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<tbody>
<tr>
<td><strong>Returning Students</strong></td>
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<tr>
<td>Fall</td>
<td>8/11/14</td>
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<tr>
<td>Spring</td>
<td>1/8/15</td>
<td>8/9/15</td>
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<td><strong>Leop + Llm Students</strong></td>
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<td>Spring</td>
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<td><strong>Foreign Exchange Students</strong></td>
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<td>Fall (Group 1)</td>
<td>8/11/14</td>
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<td>Spring (Group 2)</td>
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FAQS

Do I have to make an appointment to visit SHS?
No. You can drop in whenever you need care or want to talk things over; however, an appointment is strongly recommended. There are two ways to make an appointment. You can call (415) 565-4612 or you can stop by SHS.

What happens if I get care outside of SHS during a school term without getting a referral first?
All your non-emergency health care starts at SHS. When covered students do not obtain a written referral from SHS during school terms before receiving non-emergency medical or behavioral health care outside SHS, the services they receive are not covered under UC SHIP and claims submitted for these services will be denied. During summer months and breaks when SHS is closed, make an
appointment with a primary care clinician from UCSF Medical Center or another Anthem Blue Cross PPO Prudent Buyer network provider if you need care or a referral to a specialist.

You do not need a referral from SHS to receive care in an emergency department or at an urgent care clinic.

UC SHIP INCLUDES VALUABLE ENHANCEMENTS FOR YOU BECAUSE WE’VE CHOSEN TO COMPLY WITH THE AFFORDABLE CARE ACT (ACA)

UC SHIP didn’t wait for the ACA to take the lead on essential, affordable care that emphasizes prevention. We took the initiative to introduce these valuable improvements for you because we believe in them:

• Guaranteed coverage to all students; no waiting periods due to preexisting conditions
• 100% coverage of preventive care services
• No lifetime limits on your medical and behavioral health benefits
• No limits on pharmacy prescription benefits
• No caps on your Essential Health Benefits (as defined by the ACA)

This year, we’re adding more ACA-inspired provisions because they will be valuable to you:

• If you become ill or injured, UC SHIP will now step in to pay 100% of your costs sooner. Deductibles, coinsurance, medical copays and prescription copays now count toward the maximum set for out-of-pocket costs you will pay in a benefit year.
• Coverage for participation in clinical trials for life-threatening illnesses, according to Anthem Blue Cross clinical guidelines.
• Coverage for genetic testing to assess risk for a variety of conditions, according to Anthem Blue Cross clinical guidelines.

WHEN YOU GO TO SHS

Most of your health care needs can be handled by the staff at SHS. Consider it your health home, where you can obtain the care of your primary care clinician, nurses, nurse practitioners, other professional health care providers and
insurance specialists. You can visit SHS with or without an appointment, although an appointment is highly recommended. To make an appointment, call SHS at (415) 565-4612 or visit the SHS website at www.uchastings.edu/about/admin-offices/health-services/index.php.

If you are enrolled under UC SHIP as a student and you need non-emergency medical care during the school year, you must first go to SHS for treatment or to obtain a written referral. During summer months and breaks when SHS is closed, contact a primary care clinician from the Anthem Blue Cross Prudent Buyer network, including the UC medical centers, if you need care or a referral to a specialist. See “How to Get in Touch” at the end of this brochure for Anthem Blue Cross contact information.

MAKE THE MOST OF FREE PREVENTIVE CARE

Getting free preventive care couldn’t be easier—it's right on campus at SHS. The covered services listed below are examples of the free preventive care available to you at SHS through UC SHIP:

- Annual routine physical exam
- Cervical cancer screening
- Prostate cancer screening
- Select preventive immunizations
- Tuberculosis screening

IF YOU NEED NON-EMERGENCY MEDICAL CARE FOR ILLNESS OR INJURY

Your primary care clinician at SHS is the place to start. If you need care that can’t be handled at SHS, your primary care clinician will provide you with a referral to a specialist, hospital or other type of Anthem Blue Cross PPO Prudent Buyer network provider, including those linked with the UC medical centers, to keep your costs low. See “How to Get in Touch” at the end of this brochure for Anthem Blue Cross contact information.

IF YOU NEED COUNSELING OR PSYCHIATRIC SERVICES

Psychiatrists, psychologists and therapists are here to help you with academic concerns, relationship issues, stress management or any other personal concerns you may have. Visit SHS to make an appointment with a mental health provider. If you receive a referral from your SHS clinician,
you can obtain care at UCSF Medical Center or another UC medical center. You can also search www.anthem.com/ca for a therapist or psychiatrist who specializes in your area of concern, such as eating disorders, depression, grief counseling or other areas of specialization.

During summer months and breaks when SHS is closed, you can make an appointment directly with a mental health provider at UCSF Medical Center or with other members of the Anthem Blue Cross PPO Prudent Buyer network listed on www.anthem.com/ca.

UC SHIP’s mental health benefits comply with state and federal Mental Health Parity laws, which require that mental health conditions be covered as any other medical illness would be for both inpatient and outpatient treatment.

YOU CAN TALK WITH A NURSE 24/7

Covered students and dependents have access to a nurse 24 hours a day, 365 days a year through the Anthem Blue Cross 24/7 NurseLine by calling (877) 351-3457.

IF YOU NEED TO BE HOSPITALIZED

Students covered by UC SHIP are required to work with either SHS or Anthem Blue Cross to plan a hospitalization. Anthem Blue Cross must authorize all non-emergency hospitalizations.

Your SHS primary care clinician will give you a referral and help you find the appropriate and most affordable provider for the care you need. Remember, UCSF Medical Center and the other UC medical centers offer you the UC Family discount, no deductible, plus the lowest copays and coinsurance. Or you may prefer another hospital that qualifies as an in-network facility under Anthem Blue Cross and that has agreed to accept Anthem Blue Cross’ negotiated rates. These options will help make your stay more affordable.

If you choose to receive care at an out-of-network hospital, you will pay an inpatient deductible and out-of-network rates that will be generally higher than at an Anthem Blue Cross in-network facility.
IF YOU HAVE AN EMERGENCY

In case of emergency, you should call 911 or report directly to the emergency department of the nearest hospital. An SHS referral is not required for care provided in an emergency department or at an urgent care clinic.

Anthem Blue Cross defines an emergency as a sudden, serious and unexpected acute illness, injury or condition (including sudden and unexpected severe pain) that you reasonably perceive could permanently endanger your health if medical treatment is not received immediately. Anthem Blue Cross makes the sole and final determination as to whether services were rendered in connection with an emergency.

IF YOU ARE AN EXPECTANT PARENT

In addition to the Anthem Blue Cross 24/7 NurseLine, students or their covered dependents who are pregnant have access to a registered nurse 24 hours a day, seven days a week to answer expectant or new parents’ questions about important topics related to pregnancy such as labor, nursing, postpartum depression, etc.

Anthem Blue Cross offers a Future Moms program to help with wellness and preparation of pregnant UC SHIP members. If you enroll, Anthem Blue Cross will send you a $30 Babies“R”Us® gift card. Register for the Future Moms program at no additional cost by calling toll free (866) 664-5404.

Inpatient hospital care in connection with childbirth will be covered for at least 48 hours following a normal delivery (96 hours following a cesarean section).

IF YOU BECOME A NEW MOTHER OR FATHER

Notify Anthem Blue Cross within 31 days after the birth so your baby will be eligible for the following benefits:

Coverage up to the first 31 days after birth or up to a maximum lifetime benefit of $25,000 (whichever occurs first) is provided for the baby under the student’s plan. Coverage is:

- 90% of the discounted maximum allowed amount for care provided at a UC medical center.
• 80% of the maximum allowed amount for care provided by other Anthem Blue Cross network providers.

• 60% of the maximum allowed amount for care provided by out-of-network providers.

For coverage beyond the first 31 days after birth or beyond $25,000 in benefits, you must enroll the newborn in UC SHIP as a dependent within 31 days of birth. Coverage is 80% of the maximum allowed amount for Anthem Blue Cross network providers’ services. Students can enroll newborns by contacting Wells Fargo Insurance Services at (800) 853-5899.

IF YOU NEED A PRESCRIPTION FILLED

Ventegra Pharmacy Services is the pharmacy benefit administrator for UC SHIP. You can contact them at (877) 867-0943. This information is also conveniently accessible on your Anthem Blue Cross ID card or you can log in at https://members.rxclearinghouse.com/Login.aspx to find out more about your pharmacy benefits and to keep your costs low.

To get a prescription filled at the lowest UC SHIP copay, take your prescription to a Ventegra network pharmacy, including those in the UC medical centers, and present your Anthem Blue Cross ID card. The amount you pay for a covered prescription—your copay—will be determined by whether the drug is a generic, brand-name formulary or brand-name non-formulary medication. You may also use the Ventegra Pharmacy Services mail-order program.

If you choose to fill your prescription at an out-of-network pharmacy, your costs will increase. You will likely need to pay for the entire amount of the prescription and then submit a prescription drug claim form for reimbursement. The pharmacist must complete and sign the appropriate section of the claim form to ensure proper processing of the claim for reimbursement.

If you submit claims from out-of-network pharmacies, your reimbursement will be based on a limited-fee schedule. The fee schedule may be considerably less than the cost of the medication. You are responsible for paying any difference.

Covered prescriptions are listed in a formulary that includes brand and generic medications that have undergone extensive review for therapeutic value for a particular medical condition, safety and cost. You can see the list...
online at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar, click on “Description of Benefits” and find the “Ventegra Formulary” PDF under the section on the Pharmacy Plan.

HOW TO MAKE THE MOST OF YOUR BENEFITS

UC SHIP makes a healthy UC experience affordable. Read over your coverage, make thoughtful choices and you’ll make the most of the savings available to you.

During the school year, all your health care starts at SHS. If you are enrolled under UC SHIP as a student and you need non-emergency medical care, you must first go to SHS for treatment or to obtain a written referral. If students do not obtain a written referral from SHS before receiving off-campus non-emergency medical or behavioral health care, the services will not be covered under UC SHIP. Care in an emergency department or at an urgent clinic does not require a referral from SHS.

During summer months and breaks when SHS is closed and no referral is required, contact a primary care clinician from the Anthem Blue Cross PPO Prudent Buyer network, which includes UC medical center facilities and professional providers, if you need care or a referral to a specialist.

For the maximum benefit payment, choose to receive care at one of the UC medical centers, including UCSF Medical Center, or from other providers within the Anthem Blue Cross PPO Prudent Buyer network. If you use providers or facilities that are not part of the Anthem Blue Cross PPO Prudent Buyer network, your claims will be paid at the lower out-of-network allowed amounts.

BENEFIT YEAR DEDUCTIBLE

The deductible is the amount of money you pay out of your own pocket before UC SHIP begins paying for services. You pay:

- No deductible when you go for care to SHS, UCSF Medical Center or any of the other UC medical centers (with an SHS referral).
- A $200 deductible toward care you receive from Anthem Blue Cross providers who are not associated with UC medical centers.
- A $500 deductible toward care you receive from out-of-network providers.
The benefit year deductible applies to all services listed in the following “What is covered” section, except where noted. The deductible does not apply to pharmacy services.

**ANNUAL LIMIT ON YOUR OUT-OF-POCKET COSTS**

Once you pay the annual limit of out-of-pocket costs toward your care, UC SHIP steps in to pay 100% of your medical and pharmacy costs. You are not required to pay additional coinsurance or copayments toward these services for the remainder of the benefit year.

Beginning this year, deductibles, coinsurance, medical copays and prescription copays now count toward your maximum out-of-pocket costs, making it possible for you to meet these annual limits faster:

- $2,000 for UC Family care at SHS and/or a UC medical center
- $3,000 for in-network care provided by other members of the Anthem Blue Cross PPO Prudent Buyer network
- $6,000 for out-of-network care

These are separate limits, meaning they do not accumulate toward each other.

Amounts exceeding stated benefit limits (see explanation of maximum allowed amounts in the next section on “What is covered”) and payments for services not covered by the plan do not count toward the maximum out-of-pocket limit.

**WHAT IS COVERED**

On the following pages is a brief summary of your medical benefits. Find a full list of covered services at [www.ucop.edu/ucship](http://www.ucop.edu/ucship). Select your campus home page from the left-hand navigation bar and click on “Description of Benefits” to find the “Benefit Booklet.”

Keep in mind that Anthem Blue Cross sets allowed maximums for services provided by in-network and out-of-network providers. The following benefit summary lists the percentage of the allowed maximum that the plan pays. For example, if the summary lists coverage at 90% and there is a $100.00 allowed maximum amount for a treatment, then the plan pays $90.00 toward the bill.
Don’t forget! You pay no annual deductible toward services provided at the SHS or at any of the five UC medical centers, including their facilities and professional providers. You pay an annual deductible of $200 toward in-network services from other Anthem Blue Cross providers and $500 toward out-of-network services, except where noted in the following chart.

### BENEFIT COVERAGE AND COST COMPARISON CHART

#### OUTPATIENT SERVICES

<table>
<thead>
<tr>
<th>UC Family SHS @ UC Medical Centers</th>
<th>Anthem Blue Cross PPO Prudent Buyer Network</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Network</td>
<td></td>
<td>Out-of-Network</td>
</tr>
</tbody>
</table>

#### MEDICAL OFFICE VISITS

<table>
<thead>
<tr>
<th>At SHS</th>
<th>At UC Medical Centers</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>100% after $20 copayment for primary care, $40 copayment for specialty care, deductible waived</td>
<td>60% for primary and specialty care</td>
</tr>
</tbody>
</table>

#### BEHAVIORAL HEALTH OFFICE VISITS

<table>
<thead>
<tr>
<th>At SHS</th>
<th>At UC Medical Centers</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>100% after $20 copayment, deductible waived</td>
<td>60%</td>
</tr>
</tbody>
</table>

#### ROUTINE PHYSICALS/STUDENT ADULT PREVENTIVE CARE

<table>
<thead>
<tr>
<th>SHAFTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
</tr>
</tbody>
</table>

#### URGENT CARE

<table>
<thead>
<tr>
<th>At UC Medical Centers</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% after $25 copayment</td>
<td>60%</td>
</tr>
</tbody>
</table>

This brochure provides a brief summary of UC SHIP benefit information.
## OUTPATIENT SERVICES

<table>
<thead>
<tr>
<th>UC Family SHS @ UC Medical Centers</th>
<th>Anthem Blue Cross PPO</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In-Network</strong></td>
<td><strong>Out-of-Network</strong></td>
<td></td>
</tr>
</tbody>
</table>

### CONTRACEPTIVE SERVICES & DEVICES

- **At UC medical centers**
  - **In-Network**: 100%
  - **Out-of-Network**: 60%

Includes: IUDs, diaphragms, injectable drugs, and implants

**Note:** For prescription contraceptive drugs, see the “Outpatient Prescription Drugs” table below

### MAMMOGRAMS, PREVENTIVE

- **At UC medical centers**
  - **In-Network**: 100%
  - **Out-of-Network**: 60%

### LAB TESTS, X-RAYS AND IMAGING

- **90%**
  - **80%**
  - **60%**

### OUTPATIENT SURGERY, PHYSICIANS AND ANESTHESIOLOGISTS

- **At UC medical centers**
  - **90%**
  - **80%**
  - **60%**

### OUTPATIENT SURGERY, OUTPATIENT SURGERY CENTER

- **At UC medical centers**
  - **90%**
  - **80% after $250 copayment**
  - **60% after $250 copayment**

**Maximum allowed amount reduced by 25% for services and supplies provided by a non-contracting hospital, except in cases of emergency admission.**
## OUTPATIENT SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>UC Family SHS &amp; UC Medical Centers</th>
<th>Anthem Blue Cross PPO Prudent Buyer Network</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In-Network</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ACUPUNCTURE</strong> (20-visit maximum per benefit year)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At UC medical centers</td>
<td>100% after $10 copayment</td>
<td></td>
<td>60%</td>
</tr>
<tr>
<td><strong>AMBULANCE—GROUND</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>80% if patient receives emergency care or is hospitalized</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AMBULANCE—AIR</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% if patient receives emergency care or is hospitalized</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CHIROPRACTIC SERVICES AND OSTEOPATHIC MANIPULATION</strong> (unlimited)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At UC medical centers</td>
<td>100% after $10 copayment</td>
<td></td>
<td>60%</td>
</tr>
<tr>
<td><strong>DENTAL INJURY TO NATURAL TEETH</strong></td>
<td><strong>90%</strong></td>
<td><strong>80%</strong></td>
<td><strong>60%</strong></td>
</tr>
<tr>
<td><strong>IMMUNIZATIONS, PREVENTIVE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Includes: Diphtheria/tetanus/pertussis; measles, mumps, and rubella; meningococcal; varicella; influenza; hepatitis A and hepatitis B; pneumococcal; polio; and human papillomavirus (first injection in the series must be administered before age 27)</td>
<td>100%</td>
<td>100%, deductible waived</td>
<td>60%</td>
</tr>
</tbody>
</table>
OUTPATIENT SERVICES

<table>
<thead>
<tr>
<th>UC Family SHS @ UC Medical Centers</th>
<th>Anthem Blue Cross PPO Prudent Buyer Network</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Network</td>
<td>Out-of-Network</td>
<td></td>
</tr>
</tbody>
</table>

TUBERCULOSIS SCREENING AND TESTING

Includes: Preventive exams, campus-required activities and non-campus requirements for employment and other programs

<table>
<thead>
<tr>
<th>At SHS</th>
<th>Anthem Blue Cross PPO</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>Not covered</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

For Medical Reasons

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>90%</td>
<td>80%</td>
<td>60%</td>
</tr>
</tbody>
</table>

PRENATAL CARE

<table>
<thead>
<tr>
<th>At UC medical centers</th>
<th>Anthem Blue Cross PPO</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>After $5 copayment for first office visit, 100%</td>
<td>After $20 copayment for first office visit, 100% deductible waived</td>
<td>60%</td>
</tr>
</tbody>
</table>

MATERNITY

<table>
<thead>
<tr>
<th>At UC medical centers</th>
<th>Anthem Blue Cross PPO</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>90%</td>
<td>80%</td>
<td>60%</td>
</tr>
</tbody>
</table>

ABORTION

<table>
<thead>
<tr>
<th>At UC medical centers</th>
<th>Anthem Blue Cross PPO</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>90%</td>
<td>80%</td>
<td>60%</td>
</tr>
</tbody>
</table>

PHYSICAL THERAPY, PHYSICAL MEDICINE, OCCUPATIONAL THERAPY AND SPEECH THERAPY (unlimited)

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10 copayment</td>
<td>$40 copayment, deductible waived</td>
<td>60%</td>
</tr>
</tbody>
</table>

PSYCHO-EDUCATIONAL TESTING

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>90%</td>
<td>80%</td>
<td></td>
</tr>
</tbody>
</table>

Note: Lifetime maximum of $3,000 in benefits for psycho-educational testing conducted by a licensed clinical, educational, or counseling psychologist or neuropsychologist to assess and diagnose functional limitations due to learning disabilities.
OUTPATIENT SERVICES

<table>
<thead>
<tr>
<th>UC Family</th>
<th>Anthem Blue Cross</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>UC Medical Centers</td>
<td>PPO Prudent Buyer Network</td>
<td>Providers</td>
</tr>
</tbody>
</table>

In-Network | Out-of-Network

MEDICAL EVACUATION

Necessary expenses up to $10,000, deductible waived, for return to your home country when prior authorization has determined medical necessity

REPATRIATION

If you die while enrolled in UC SHIP, the plan pays necessary expenses up to $7,500 (deductible waived) incurred to meet the minimum legal requirements for transportation of human remains. This benefit includes preparation and transport of your remains from the United States to the country of your permanent legal residence or, if you are a permanent legal resident of the United States, from the country in which you are traveling to the United States.

OUTPATIENT PRESCRIPTION DRUGS

<table>
<thead>
<tr>
<th>Ventegra In-Network Pharmacies</th>
<th>Out-of-Network Pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Including UC Medical Centers</td>
<td></td>
</tr>
</tbody>
</table>

NOT SUBJECT TO A DEDUCTIBLE

| $5 generic | $5 generic |
| $25 brand-name formulary, 30-day supply | $25 brand-name formulary, 30-day supply |
| $40 brand-name non-formulary, 30-day supply | $40 brand-name non-formulary, 30-day supply |
| + amounts exceeding Ventegra maximums | |

Note: In-network, 100% prescription coverage for FDA-approved generic prescription contraceptives and brand-name prescription contraceptives when a generic equivalent is not available.
## EMERGENCY ROOM SERVICES

<table>
<thead>
<tr>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>UC Family</td>
<td>Anthem Blue Cross PPO Prudent Buyer Network</td>
</tr>
</tbody>
</table>

### EMERGENCY ROOM

- **At UC medical centers**
  - 100% after $125 copayment

- **In-Network**
  - 100% after $125 copayment, deductible waived
  - $125 copayment + amounts exceeding Anthem Blue Cross maximum allowable amount, deductible waived

Copayment will be waived if admitted.

**Note:** Emergency room services received at a UC facility will be covered at the UC Family level, even if the student is treated by a non-UC provider. Emergency room services received at an out-of-network hospital, or from out-of-network clinicians at an in-network hospital, will result in additional charges to the student unless the services are provided at a UC facility. Anthem Blue Cross pays the claim at 100% of the maximum allowed amount after a $125 copayment is paid. The student will be responsible for paying amounts exceeding Anthem Blue Cross maximums.

### ATTENDING PHYSICIANS

- 100%
- 100% deductible waived
- 100% of Anthem Blue Cross maximum allowable amount + amount exceeding Anthem Blue Cross maximum allowable amount, deductible waived
INPATIENT HOSPITAL SERVICES

- Includes medical services, behavioral health and maternity services
- Coverage reduced by 25% for services and supplies provided by an out-of-network hospital, except in cases of emergency admission
- Anthem Blue Cross must pre-authorize inpatient services

<table>
<thead>
<tr>
<th>UC Family UC Medical Centers</th>
<th>Anthem Blue Cross PPO Prudent Buyer Network</th>
<th>All Other Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Network</td>
<td>Out-of-Network</td>
<td></td>
</tr>
<tr>
<td>90%</td>
<td>80% after $500 copayment</td>
<td>60% after $500 copayment</td>
</tr>
</tbody>
</table>

Includes: Semi-private room, inpatient surgery, physicians, specialists, nursing services, lab tests, X-rays, imaging, medication and supplies
WHAT IS NOT COVERED

Some of the expenses and services that are excluded from coverage by UC SHIP are listed below. For a complete list of the items and services that the plan excludes, go to www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar and click on “Description of Benefits” to find the “Benefit Booklet.” You can also contact Anthem Blue Cross Customer Service at (866) 940-8306.

Don't forget! If you obtain non-emergency medical services outside of SHS during the school year without first obtaining a written referral from SHS, your costs will not be paid by UC SHIP. During summer months and breaks when SHS is closed and referrals are not required, contact a primary care clinician from the Anthem Blue Cross PPO Prudent Buyer network if you need a referral to a specialist.

Here is a partial list of exclusions:

• Amounts in excess of covered expenses or any benefit maximum
• Commercial weight-loss programs and health club memberships
• Cosmetic surgery
• Diabetic supplies that are not specifically listed as covered
• Experimental or investigative procedures or medications, although you may request an independent medical review
• Eye surgery for refractive defects such as nearsightedness or astigmatism; contact lenses or eyeglasses required as a result of such surgery
• Food or dietary supplements
• Government-provided treatments
• Infertility treatments
• Inpatient diagnostic tests that could have been performed safely on an outpatient basis
• Lifestyle programs
• Non-licensed health care providers
• Not medically necessary services
• Personal items for comfort, hygiene or beautification
• Private-duty nursing
• Services not specifically listed in the Benefit Booklet as covered services
• Services performed by a family member
• Services received before your effective date or after your coverage period ends, except as covered under continuation of benefits
• Sports-related conditions resulting from intercollegiate or professional sports
• Sterilization reversal
• Surrogate mother services
• Work-related conditions if benefits can be recovered under workers' compensation coverage or law
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- Your Anthem Blue Cross ID card .................................................. 37
- You need a referral for care outside of SHS .............................. 37
- Emergency care ........................................................................ 38
- Filing a medical or counseling and psychological services claim ... 38
- Payment of a bill can be denied ................................................ 39
- If you are covered by UC SHIP and a second insurance plan .... 39
- Your privacy .............................................................................. 40
- Coverage during term breaks ................................................. 40
- If you travel outside the United States .................................. 41

FAQS

If I have an emergency, what should I do?
Call 911 or report directly to the emergency department of the nearest hospital. Referrals are not required if you receive care in an emergency department or at an urgent care clinic, but treatment will be covered only if Anthem Blue Cross determines it was an urgent or emergency situation.

I need care during a term break. What do I do?
During summer months and breaks when SHS is closed, select a doctor from UCSF Medical Center or another member of the Anthem Blue Cross Prudent Buyer network at www.anthem.com/ca or contact Anthem Blue Cross Customer Service at (866) 940-8306. UC SHIP contracts with Anthem Blue Cross to provide medical and behavioral health services through their extensive Prudent Buyer network of hospitals and providers, including the UC medical centers where you have UC Family coverage.
YOUR ANTHEM BLUE CROSS ID CARD

You need to show that you have coverage each time you get care. Bring your student ID card and your UC SHIP Anthem Blue Cross ID card when you go to SHS or a provider off campus. If you lose your Anthem Blue Cross ID card, contact Customer Service at (866) 940-8306 for assistance in creating a temporary ID card.

YOU NEED A REFERRAL FOR CARE OUTSIDE OF SHS

If you want coverage for care outside of SHS during school terms, it's important to complete all of these steps.

1. You've got to start at SHS to receive a written referral from your primary care clinician before you receive non-emergency care outside SHS.

   You must complete this step for most non-emergency medical and behavioral health care services outside of SHS in order to qualify for UC SHIP coverage. Otherwise, the claims will not be covered under UC SHIP.

2. When you receive a referral, you will need to choose a health care provider for your care. Your UC Family coverage makes it cost-effective for you to go to one of the five nationally recognized UC medical centers for care. UC SHIP contracts with Anthem Blue Cross to provide additional medical and behavioral health options from its extensive Prudent Buyer network of hospitals and providers. SHS staff can help students locate Anthem Blue Cross PPO providers, including those associated with UC medical centers.

   If you choose an out-of-network provider, your claims will be paid at a lower percentage, so you will pay more out of your own pocket. Note that the provider’s charges may be significantly higher than Anthem Blue Cross’ maximum allowed amount. In this case, you will be responsible for paying the difference between the provider’s billed charge and the maximum allowed amount.

3. Referrals are made at the sole and absolute discretion of SHS. The referral does not guarantee payment or coverage. Check to make sure the care you plan to receive is a covered benefit under UC SHIP and deemed medically necessary by Anthem Blue Cross by calling Anthem Blue Cross Customer Service at (866) 940-8306 or finding the details of your coverage in the Benefit Booklet. Find it at www.ucop.edu/ucship. Select your
campus home page from the left-hand navigation bar and click on “Description of Benefits” to find the “Benefit Booklet.”

4. During summer months and breaks when SHS is closed, contact a primary care clinician or a behavioral health provider from the Anthem Blue Cross network if you need medical care or a referral to a specialist.

EMERGENCY CARE

In case of emergency, students should call 911 or report directly to the emergency department of the nearest hospital.

SHS referrals are not required if you receive care in an emergency department or at an urgent care clinic, but the cost will be covered only if Anthem Blue Cross determines it was an emergency situation. Anthem Blue Cross defines an emergency as a sudden, serious and unexpected acute illness, injury or condition (including sudden and unexpected severe pain) that you reasonably perceive could permanently endanger your health if medical treatment is not received immediately. Anthem Blue Cross makes the final determination of what qualifies as an emergency.

FILING A MEDICAL OR COUNSELING AND PSYCHOLOGICAL SERVICES CLAIM

Medical or counseling and psychological services provided by SHS are fully covered by a mandatory health services fee paid by all UC Hastings students.

For services received outside of SHS during school terms with a written referral, either you or your provider submits the itemized bills to Anthem Blue Cross. Claims must be received no later than 11 months after the date the health care service is rendered.

Here's how it typically works. Most health care providers require payment of the student's portion of fees at the time of service. Network providers will submit a claim for the remaining portion of the bill directly to Anthem Blue Cross for you. Out-of-network providers usually require members to submit their own claim to Anthem Blue Cross. If you receive a bill for the full cost of services, contact Anthem Blue Cross for assistance or seek guidance at SHS.

Expect to receive an Explanation of Benefits (EOB) from Anthem Blue Cross within six weeks after submitting a
bill showing what was paid on your claim. For questions about claims or the EOB, call Anthem Blue Cross at (866) 940-8306.

PAYMENT OF A BILL CAN BE DENIED

Please note that Anthem Blue Cross can deny payment of a bill if you do not follow the plan guidelines. There are numerous examples of how that can come about, but the most frequently occurring reason is if you skip care at SHS and go directly to providers without receiving a referral from SHS. If you have not received a referral from SHS, Anthem Blue Cross can deny payment of your bill.

There are details throughout this brochure that alert you to choices that will cause you to lose eligibility for coverage. Contact SHS or Anthem Blue Cross Customer Service at (866) 940-8306 if you have any questions about qualifying for coverage.

IF YOU ARE COVERED BY UC SHIP AND A SECOND INSURANCE PLAN

To get the most out of your coverage, you need to become familiar with how the two plans work together, which is called coordination of benefits.

Please call Anthem Blue Cross Customer Service at (866) 940-8306 or find directions online at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar and go to “Coordination of Benefits” and complete the Coordination of Benefits (COB) questionnaire with information about your other health plan.

UC SHIP covers services at SHS regardless of whether students have coverage through another health plan. After the student pays the copayment or coinsurance amount that UC SHIP considers the student’s responsibility, if any, the student must submit the claims to her or his other insurance carrier for reimbursement of that amount. SHS does not submit claims to other health plans.

For services received outside of SHS, the student’s other medical plan will be considered the primary plan, meaning that plan must pay claims first. After the primary plan processes and pays a claim, any remaining charges may be submitted to UC SHIP (the secondary plan). This holds true for all medical plans except Medi-Cal, MRMIP.
This brochure provides a brief summary of UC SHIP benefit information and TriCare. If a student is covered by any of these plans, UC SHIP will be the primary plan, and Medi-Cal/MRMIP/TriCare will be the secondary plan.

For questions about coordination between plans, call Anthem Blue Cross Customer Service at (866) 940-8306.

YOUR PRIVACY

SHS is committed to protecting your privacy and the confidentiality of your health information. Specifically, your health information will be used or disclosed only for purposes related to your treatment, payment of your fees and insurance claims, and for SHS and UC SHIP operations. Unless allowed by law, your health information cannot be disclosed to anyone for any other purpose without your written authorization.

Comments or concerns about privacy issues may be sent to SHS. The UC SHIP privacy policy is available online. Click to the UC SHIP home page from www.ucop.edu/ucship and scroll to the bottom of the page to find the “Privacy Policy” PDF.

Here is an example of our privacy practices. If students do not pay their portion of SHS fees, or if SHS service is denied coverage by UC SHIP, the student’s campus account may be billed for the outstanding amount. The billing statement will state only that the charges were incurred at SHS. No health information is released to the campus billing office. For services outside SHS, charges will be sent directly to the insured’s (student’s) address.

COVERAGE DURING TERM BREAKS

Students who are actively enrolled in UC SHIP are covered even when they are off campus on break. Remember, the cost of your care will be less if you use a UC medical center or another Anthem Blue Cross in-network provider. In the next section, you will find a description of the travel medical coverage UC SHIP provides.

There is no gap in coverage during term breaks. If SHS is closed, you can select a network provider at www.anthem.com/ca or by calling Anthem Blue Cross Customer Service at (866) 940-8306.

An SHS referral is not required if you receive care in an emergency department or at an urgent care clinic, but the
cost will be covered only if Anthem Blue Cross determines it was an emergency situation.

IF YOU TRAVEL OUTSIDE THE UNITED STATES

Whether traveling or living outside of the country, you and your dependents covered under UC SHIP can use the BlueCard Worldwide program when care is needed. You may also be eligible for travel accident coverage if you are traveling on UC business.

Here’s what to do before you leave:

• Before leaving the United States, call the Customer Service number on the back of your Anthem Blue Cross ID card to find out exactly how you are covered abroad.

• Call SHS to obtain information on coverage for international vaccines and the additional UC Travel Accident Policy, which is described below.

• If you are a student who is traveling on university business, check to see if you are eligible for travel accident insurance administered by the UC Office of the President at no additional cost to students. You must register before you leave on your trip to receive the coverage. Registration is simple and takes less than five minutes. For more information and to register, go to www.ucop.edu/risk-services/.

• Make a record of important SHS phone numbers and pack your UC and Anthem Blue Cross ID cards. The Anthem Blue Cross phone numbers are on your ID card.
This brochure provides a brief summary of UC SHIP benefit information
YOUR DENTAL AND VISION CARE BENEFITS
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How your dental coverage works ........................................ 44
What is covered .......................................................... 45
What is not covered ..................................................... 46
How your vision care coverage works .............................. 46
What is covered .......................................................... 47
What is not covered ..................................................... 48
How to use your vision care coverage wisely .................... 48

FAQS

Am I automatically enrolled in the dental and vision care plans?
Yes. Enrollment in UC SHIP for registered students includes dental and vision coverage.

How do I find a dentist who is located near campus?
You can select a dentist from the Delta Dental Preferred Provider network of dentists. The list is available online or by phone through Delta Dental Customer Service at (800) 765-6003.

You may also use a dentist who is not part of the Delta Dental Preferred Provider network and pay more toward your care. You do not need a referral to receive dental care.

HOW YOUR DENTAL COVERAGE WORKS

UC SHIP provides coverage under the Delta Dental PPO network. You also have coverage for other Delta Dental dentists and out-of-network dentists. The plan pays the highest benefits when you receive services from Delta Dental PPO dentists.

Delta Dental has many different types of networks available, so be sure you select a dentist from the Delta Dental PPO network. You can find this list online at www.deltadentalins.com/ucship or call Delta Dental Customer Service at (800) 765-6003.

Remember, if you go to a dentist belonging to another Delta Dental network, like Delta Dental Premier, your costs will be higher.
WHAT IS COVERED

Delta Dental sets a maximum plan allowance on the fees for each treatment. Delta Dental PPO providers have agreed to a fee schedule, but out-of-network providers have not. If your dentist charges more than the plan allowance for Delta Dental PPO services, you will be responsible for the full amount of the excess fees.

<table>
<thead>
<tr>
<th>Delta Dental PPO Network</th>
<th>Other Delta Dental Networks or Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreed-to Delta Dental PPO maximum allowed fee schedule</td>
<td>If fees are higher than the Delta Dental PPO maximum allowed fee schedule, you pay the excess</td>
</tr>
</tbody>
</table>

ANNUAL DEDUCTIBLE

| None for preventive and diagnostic services | None for preventive and diagnostic services |
| $25 per person for other services | $50 per person for other services |

PREVENTIVE AND DIAGNOSTIC SERVICES

- **100%**
  - **Includes:** Oral exams; cleanings (once every 6 months); X-rays (one bite-wing series within 12 months); fluoride treatment

BASIC SERVICES

- **80% after you pay deductible**
  - **Includes:** Fillings and extractions; endodontics (root canal); periodontics; oral surgery

MAJOR SERVICES

- **70% after you pay deductible**
  - **Includes:** Prosthodontics; inlays/onlays; crowns and cast restorations

(continued on next page)
WHAT IS NOT COVERED

For a complete list of dental plan exclusions and further details, read the full description of plan benefits called “Evidence of Coverage.” Find the details at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar. Click on the “Description of Benefits” link, scroll down to the Dental Plan and select “Evidence of Coverage.” You can also check with Delta Dental Customer Service at (800) 765-6003.

HOW YOUR VISION CARE COVERAGE WORKS

UC SHIP provides vision plan benefits through the Anthem Blue View Vision Insight network of providers. Find a full list of providers near you at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar and go to “Vision.” Or call Anthem Blue View Vision at (866) 940-8306.

Be sure to make the most of your coverage. UC SHIP covers a greater portion of your fees if you receive exams, glasses or lenses from a provider in the Anthem Blue View Vision Insight network.

<table>
<thead>
<tr>
<th>Delta Dental PPO Network</th>
<th>Other Delta Dental Networks or Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MAXILLOFACIAL PROSTHETICS AND IMPLANTS</strong></td>
<td></td>
</tr>
<tr>
<td>Not covered</td>
<td>Not covered</td>
</tr>
<tr>
<td><strong>ORTHODONTICS</strong></td>
<td></td>
</tr>
<tr>
<td>Not covered</td>
<td>Not covered</td>
</tr>
<tr>
<td><strong>ANNUAL BENEFIT MAXIMUMS</strong></td>
<td></td>
</tr>
<tr>
<td>$1,000 per member</td>
<td>$750 per member</td>
</tr>
</tbody>
</table>

Note: Not to exceed a cumulative maximum of $1,000 per benefit year for all dental benefits
## WHAT IS COVERED

Here is a brief summary of your vision plan benefits. Find a full list of covered services near you at [www.ucop.edu/ucship](http://www.ucop.edu/ucship). Select your campus home page from the left-hand navigation bar and go to “Description of Benefits,” where you will find a link for the “Anthem Blue View Vision Plan.”

<table>
<thead>
<tr>
<th>Routine Eye Exam (per benefit year)</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10 copayment</td>
<td>Up to the $49 allowance</td>
</tr>
</tbody>
</table>

### Eyeglass Frames (per benefit year)

You may select an eyeglass frame and receive the following allowance toward the purchase price:

- Up to $120, then member pays 80% of costs exceeding $120
- Up to $50, then member pays 100% of costs exceeding $50

### Eyeglass Lenses (standard)

<table>
<thead>
<tr>
<th>Single lenses</th>
<th>Bifocal lenses</th>
<th>Trifocal lenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>$25 copayment</td>
<td>$25 copayment</td>
<td>$25 copayment</td>
</tr>
</tbody>
</table>

### Contact Lenses (per benefit year)

You may choose to receive contact lenses instead of eyeglass lenses and receive an allowance toward the cost of a supply of contact lenses:

<table>
<thead>
<tr>
<th>Conventional lenses</th>
<th>Disposable lenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to $120; member pays anything above $120 less a 15% discount</td>
<td>Up to $120</td>
</tr>
<tr>
<td>Up to $92</td>
<td>Up to $92</td>
</tr>
</tbody>
</table>
WHAT IS NOT COVERED

For a complete list of the items and services that Anthem Blue View Vision excludes, read the full description of plan benefits at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar. Click on the “Description of Benefits” link, scroll down to the Vision Plan and select “Blue View Vision Plan.” You can also check with Anthem Blue View Vision at (866) 940-8306.

HOW TO USE YOUR VISION CARE COVERAGE WISELY

To make the most of your coverage, find in-network Anthem Blue View Vision Insight providers. It takes just a minute to put more money into your pocket—money you can use for lots of other pressing needs.

And remember to check before you buy those sunglasses or take that store offer. They are on the list of items that aren't covered, so you'll pay the total cost out of your own pocket.

Before you say “yes” to your next purchase, make a quick check at the www.ucop.edu/ucship home page for your campus and click on “Vision” or call Anthem Blue View Vision at (866) 940-8306.
OTHER RESOURCES
DEFINITIONS OF INSURANCE TERMS

Ancillary Services  Services rendered by health care providers other than a physician, such as laboratory, radiology or other diagnostic imaging, physical therapy or other services.

Benefit Year  The time period, usually the academic year, used to determine when you satisfy your annual deductible, benefit maximums and annual out-of-pocket maximum.

Coinsurance  Coinsurance refers to cost sharing based on a percentage of the maximum allowed amount (covered expense) charged for a covered service. The insurance company or plan pays a certain percentage of a covered expense and you, the insured, pay the remaining expense.

Copayment  The set-dollar amount that a covered person must pay for a covered service, usually due at the time the service is provided.

Deductible  The amount of money the covered person is required to pay out of pocket before the insurance carrier or plan will pay for services.

Emergency  An emergency is a sudden, serious and unexpected acute illness, injury or condition (including sudden and unexpected severe pain) that you reasonably perceive could permanently endanger your health if medical treatment is not received immediately. Anthem Blue Cross makes the sole and final determination as to whether services were rendered in connection with an emergency.

Inpatient  A patient who is admitted to the hospital.

Maximum Allowed Amount  The total reimbursement payable under your plan for covered services you receive from in-network and out-of-network providers. It is the claims administrator’s payment toward the services billed by your provider combined with any deductible or coinsurance owed by you. If services are obtained from an out-of-network provider, the provider will bill you the difference, if any, between their charges and the maximum allowed amount.

Preferred Provider Organization (PPO)  A group of medical providers who contract with an insurance carrier to provide services for the insured at reduced rates.
HOW TO GET IN TOUCH WITH SHS, UC SHIP AND YOUR INSURANCE CARRIERS

Regular hours of operation are subject to change during holidays, exam periods and academic break periods. Check the SHS website for updates.

Emergency: 911

Student Health Services (SHS)
200 McAllister Street, Suite 202
San Francisco, CA 94102
www.uchastings.edu/about/admin-offices/health-services/index.php
(415) 565-4612

Monday, Tuesday, Thursday
8:30 a.m. to 3:00 p.m.
Wednesday
10:30 a.m. to 5:00 p.m.
Friday
8:30 a.m. to 1:00 p.m.

Anthem Blue Cross 24/7 NurseLine
(877) 351-3457

Ventegra Pharmacy Services
www.ventegra.net
(877) 867-0943

Delta Dental Insurance Coverage
www.deltadentalins.com/ucship
(800) 765-6003

Anthem Blue Cross and Blue View Vision Customer Service
www.anthem.com/ca
(866) 940-8306

Wells Fargo Insurance Services Customer Care for UC SHIP Voluntary Student and Dependent Coverage
(800) 853-5899
If you need care, start at SHS

Your SHS clinician will provide a referral* if you need care outside SHS. To be covered by UC SHIP, don’t skip this step

Use your UC Family discount at our nationally ranked UC medical centers, including UCSF, for your lowest costs. Or select other Anthem Blue Cross providers for in-network savings

If you have questions, call SHS or Anthem Customer Service at (866) 940-8306

Exception: No referral needed for emergency care and urgent care

This brochure provides a summary of information. For complete information on all benefits, terms, and conditions of UC SHIP, see the Benefit Booklet at www.ucop.edu/ucship. Select your campus home page from the left-hand navigation bar and click on “Description of Benefits” to find the “Benefit Booklet.”

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