Terminology in bold print is defined in the glossary section.

- **What is the Health Fee?**
  The Health Fee is assessed to each student who is registered for five or more semester hours. It is on a semester basis and is automatically charged to the University Bill (UBill). It is not insurance. This fee covers a multitude of health activities, programs, and outreach we do across campus, and covers unlimited office visits to our clinic. However, there are charges for labs, immunizations, supplies, physicals (e.g. annual exams and pap smears), and procedures (e.g. removal of lesions and wart treatment).

- **How do I pay for charges incurred?**
  We can submit them to your insurance company, charge your UBill, or you may pay by cash or check.

- **Do I need to bring my insurance card?**
  Yes. The insurance card contains vital information needed to submit your charges. A copy of both the front and back of your insurance card will be sufficient. Information needed is the policy number and the policy holder’s name, address, phone number, date of birth, and employer.

- **Will my insurance cover my charges?**
  You are advised to contact your insurance company to determine:
  1) Your benefits, copays, co-insurance, deductibles, and in & out of network coverage.
  2) Coverage at Student Health & Wellness (SH&W). Inquire if network coverage can be changed due to being away at college.
  3) If a referral is needed from a Primary Care Provider (PCP) to be seen at SH&W. Inquire if the PCP can be changed to SH&W.
  Each insurance company is different and covers different services. For instance, your insurance may not cover routine services (e.g. physicals and immunizations) but may cover services that are medically necessary (e.g. illness, injury). There is usually a customer number located on the back of your insurance card.

- **Is Student Health & Wellness a network provider?**
  SH&W may be considered out-of-network for most commercial insurances. Most Blue Cross and Blue Shield plans are accepted. When contacting your insurance company, you will need to ask about coverage using one of the SH&W providers. Check our website [http://studenthealth.uiowa.edu/info/staff](http://studenthealth.uiowa.edu/info/staff) for a listing of our providers.

- **What happens after an insurance company settles a claim?**
  Your insurance company may or may not pay charges for a variety of reasons. Charges may be applied towards your deductible or be a non-covered benefit; you may have used a provider who is out-of-network, or the insurance company did not receive requested additional information.
  Anything not covered by insurance will be posted to your UBill. It can take up to 8 weeks or more for an insurance company to process a claim. Therefore, it may be some time between your visit and when charges will appear on your UBill.

- **How do the charges appear on my UBill?**
  Charges that are posted to your UBill are listed as “Student Health & Wellness.” Charges are not itemized or detailed. We will not provide a patient’s health information to anyone without the patient’s written consent unless otherwise permitted under HIPAA or other regulations.

- **What if I have charges at University of Iowa Hospitals & Clinics (UIHC)?**
  You may receive services from UIHC, for example Radiology for an x-ray or Pathology for a lab test (e.g. pap test). If UIHC has your information, they will bill your insurance company, unless you request otherwise. If UIHC does not have your information, they will bill you directly. UIHC Business Office can assist you at 1-866-393-4605 or [http://www.uihealthcare.org](http://www.uihealthcare.org).

- **What if my insurance company requests student status?**
  The insurance company may request your current student status. You will need to send a student status report to the insurance company. You may pick up an official student status report from the University of Iowa Registrar’s office in Jessup Hall Room #1.

- **Will my parent(s)/guardians(s) know why I was seen at Student Health & Wellness?**
  The policy holder of the insurance may receive payment information from the insurance company. This is usually presented on a document titled Explanation of Benefits (EOB). The EOB may list the date of service and what type of service was performed (e.g. labs, immunizations, office visit). It may or may not be further detailed.
• Can I obtain insurance coverage through the University of Iowa?
  Contact the University of Iowa Benefits office. Phone: 319-335-2676. Their website is: http://www.uiowa.edu/hr/benefits/student/index.html

• What if I have Medicaid coverage?
  You need to present the current month’s Medicaid or Medipass card at the time of your visit in order for your charges to be submitted. If you are covered by Medipass, a referral authorization must be obtained from your Primary Care Provider in order for your visit to be covered by Medipass.

GLOSSARY:

• Co-payment/Co-insurance: A percentage or amount that you are responsible for paying as determined by your insurance company.

• Deductible: The amount the patient or insured will need to pay before insurance will pay for covered expenses.

• Explanation of Benefits (EOB): A document sent to the policyholder, listing the charges submitted to insurance, how much the insurance company will cover, and how much is the patient’s responsibility.

• HIPAA: Health Insurance Portability and Accountability Act. Federal regulations that protect the privacy of your health information.

• Insured: The individuals covered under an insurance policy.

• Non-Covered Service/Benefit: Charges submitted to an insurance company that are excluded by the insurance policy or considered non-payable by the insurance company.

• Non-Network Provider: (Out-of-Network) The provider seen is not a participating provider of that insurance plan. Therefore, the insurance company may not cover the visit or may cover at a reduced rate. Contact your insurance company before the visit to determine if special arrangements can be made to have these services covered.

• Policy holder: The owner of the insurance policy.

• Primary Care Provider (PCP): A medical professional who provides a broad spectrum of care and continuity while coordinating the health care of the patient. The PCP is chosen by the patient from a provider list supplied by the insurance company.

• Prior Authorization: Some insurance companies require you to obtain authorization from them before your visit in order for the visit to be covered.

• Referral: Some insurance companies require you to obtain a referral from your PCP if you choose to be seen by a different provider.

Student Health & Wellness Mission
To deliver quality healthcare and promote healthy lifestyles enhancing success and learning for all University of Iowa students.

STUDENT HEALTH & WELLNESS
The University of Iowa
4189 Westlawn, Newton Road
Iowa City, IA 52242-1100
Phone: 319-335-8376
Fax: 319-335-7247
E-mail: student-health@uiowa.edu
http://studenthealth.uiowa.edu

Insurance & Billing
Questions and Answers

Patient Financial Services 319-335-8376
Appointments: 319-335-8394
Nurseline: 319-335-9704
http://studenthealth.uiowa.edu