

Students Come First—Always

UC SHIP is built specifically for UC students, with students actively involved in its design. Since inception, the guiding principle has been simple: Your health and health needs come first—always.

UC SHIP meets the requirements of the Affordable Care Act (ACA). UC SHIP remains focused on meeting student health needs and priorities, including mental health.

You're Automatically Enrolled

Because all UC students are required to have medical insurance, UC automatically enrolls all registered students—including domestic and international students, and students in-absentia—in UC SHIP medical, pharmacy, dental and vision coverage. You will find the cost of coverage (premium) on your registration bill.

You can waive UC SHIP coverage if you already have a health plan that meets the University's health coverage requirements. Go to studenthealth.ucsf.edu/insurance/waiver to learn how to waive enrollment in UC SHIP before the designated fee payment deadline date for your campus.

Note: You must re-apply to waive coverage each fall term.

You Can Cover Your Spouse, Domestic Partner and Child(ren), too

If you're enrolled in UC SHIP and are married and/or have children, you can enroll those eligible dependents in the same medical, pharmacy, dental and vision coverage you have for yourself during the enrollment period. Call Wells Fargo at (800) 853-5899 for rate information and to enroll them. For information about who you can enroll in UC SHIP, go to ucop.edu/ucship > **Eligibility and Enrollment**.

The UC SHIP Plans Meet Affordable Care Act (ACA) Requirements

UC SHIP is recognized by the Centers for Medicaid & Medicare Services (CMS) as Minimum Essential Coverage (MEC) in compliance with the ACA. This means UC SHIP members meet the ACA individual mandate.

UC SHIP is convenient to access through the on-campus Student Health and Counseling Services (SHCS). Start there for non-emergency medical care that's covered, and for referrals to specialists when needed.

When compared to Preferred Provider Organization (PPO) plans, UC SHIP provides a broader physician network and lower deductibles and out-of-pocket maximums.

With UC SHIP you can choose to see any provider with a referral from the SHCS.

UC SHIP Mobile

The StudentHealth app puts your ID card and more within reach whenever you need it. Download the free app from Google Play or iTunes.



- Access your ID card and show it whenever you get care
- Find the location, hours and services of the on-campus SHCS
- Refill prescriptions.
- See medical, dental and vision coverage and claims information
- Access the Delta Dental Cost Estimator tool for a real-time estimate of what you'll pay for dental work and more
- Get notifications when there's a change in benefits or you need to take action

Download the app from Google Play or iTunes. Then click "Register Now" and enter:

- Your first and last name
- Your student ID number
- Your date of birth (mm/dd/yyyy)

No smartphone or tablet? Access the app using your computer's browser at mobilehealthconsumer.com/studenthealth.

Google Play



iTunes



CONVENIENT AND AFFORDABLE STUDENT HEALTH INSURANCE



A Health Plan That's All About You

The sole mission of the not-for-profit University of California Student Health Insurance Plan is to offer high-quality, affordable and convenient health insurance. UC SHIP covers medical care on campus and through UC's world-class medical centers and other providers.

You're automatically enrolled in medical, pharmacy, dental and vision coverage for 12 months—including summer and term breaks. And you can enroll a spouse and/or children. Your coverage includes medical services anywhere in the world.

Welcome to the UC SHIP family! Explore to learn more.

Getting Care

Your First Stop for Medical Care is ALWAYS the Student Health and Counseling Services

For routine care, start at the Student Health and Counseling Services (SHCS) on your campus. This is the first stop for care that is covered by UC SHIP, unless it is emergency care in an emergency room, urgent care clinic visits, pediatric care, obstetric services for pre-natal or maternity care, or gynecological care.

The SHCS is an on-campus outpatient health center offering a range of health services—from primary care to routine checkups, mental health and substance use disorder services and general care for unexpected issues, like sore throats or swollen ankles.

You will be cared for by a team of experts in young adult health—board-certified physicians, certified nurse practitioners, psychologists, a licensed clinical social worker, a registered dietitian and nurses.

You MUST Get a Referral for Medical Care Outside of the Student Health and Counseling Services

If needed, the SHCS will refer you to, and coordinate, additional or specialist care outside of the SHCS. You will need a referral for care outside of the SHCS, no matter how far from the campus you receive that care. Without it, UC SHIP will not provide any benefits. To get a referral, meet with a SHCS provider. Your diagnosis and location will determine whether a referral will be granted.

If services rendered are medically necessary and covered by the Plan, your referral gives you options for off-campus care, including:

- **UC Medical Centers.** Any of the five nationally ranked medical centers (at Davis, Irvine, Los Angeles, San Diego and San Francisco), or a UC-affiliated facility, doctor, or other health care provider. (Be sure to get a referral **before** making an appointment.) Care within the UC Family is discounted for students, there are no deductibles to meet, and the plan pays a bigger portion of care.
- **Anthem Blue Cross Prudent Buyer network doctors and other providers and facilities.** A nationwide network of more than 50,000 physicians and 400 hospitals. You'll first pay a deductible (see the Medical Coverage chart), then UC SHIP will pay most of the cost, and you'll pay the rest through a copay or coinsurance (the amount you're responsible for after UC SHIP pays its share).

If you are referred for services outside of SHCS, ask for provider recommendations.

You're Covered Around the World

Whether studying, traveling or living outside of the country, you and your dependents covered under UC SHIP can get care through the Blue Cross Blue Shield Global Core program. Learn more at bcbsglobalcore.com.

Referrals are Required

You must get an SHCS referral for care outside of the SHCS regardless of the distance from campus.

Referrals are not required for emergency care in an emergency room, urgent care clinic visits, pediatricians, obstetricians for pre-natal or maternity care or gynecologists.

However, you will be responsible for paying a deductible and part of the cost through a copay or coinsurance (the amount you're responsible for after UC SHIP pays its share).

Learn More

To learn more about UC SHIP benefits and what it covers, go to ucop.edu/ucship, call SHCS at (415) 476-1281, or contact Anthem Blue Cross (our medical plan administrator) at (866) 940-8306 or anthem.com/ca.



Student Health and Counseling Services
(415) 476-1281
studenthealth.ucsf.edu



Anthem Blue Cross
(866) 940-8306
anthem.com/ca



In an emergency, call 911 or go to the nearest emergency room. No referral needed.

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

Contacts

Medical care (non-urgent or emergency)

Student Health & Counseling Services
studenthealth.ucsf.edu
shs@ucsf.edu

Phone:
• (415) 476-1281

In person:

- SHCS Parnassus: Millberry Union West 500 Parnassus Ave., level P8, room 005
- Mission Bay Clinic: William J. Rutter Center 1675 Owens St., 3rd floor, room 330

Urgent or emergency care

UCSF Medical Center
Parnassus
(415) 476-1000

Mount Zion Campus
(415) 567-6600

Mission Bay Campus
(415) 353-3000

Mental Health Crisis after-hours: (415) 476-1281, option 7

Emergency Care

Dial 911 or go to the *nearest* emergency room

Doctors, providers and facilities outside of SHCS

Anthem Blue Cross
anthem.com/ca
(866) 940-8306

StudentHealth app

Download it free from Google Play or iTunes

Dental care

Delta Dental
deltadental.com
(800) 765-6003

Vision care

Anthem Blue View Vision
anthem.com/ca
(choose Vision > Blue View Vision Insight network)
(866) 940-8306

Off-campus pharmacies and prescription drug costs

OptumRx
Optumrx.com
(844) 265-1879

Rates for dependent and non-registered, voluntary students

Wells Fargo
(800) 853-5899

Waive UC SHIP coverage

Student Health and Counseling Services website
studenthealth.ucsf.edu

Medical Coverage

Highlights of your UC SHIP coverage are shown below. The Benefit-Year Deductible applies unless stated otherwise. Certain expenses and services are excluded from medical coverage. You'll find a list on the UC SHIP site at ucop.edu/ucship > [Benefits](#) > [Medical-Coverage](#) > [UCSF](#).

	NETWORK		OUT-OF-NETWORK
ALL CARE MUST START WITH SHCS TO BE COVERED BY UC SHIP. Non-emergency care outside of the SHCS requires a written referral from an SHCS provider. See "Getting Care" for exceptions.	UC FAMILY PROVIDERS <ul style="list-style-type: none"> SHCS UCSF Medical Center Any other UC medical centers and their affiliated facilities and professional providers 	ANTHEM BLUE CROSS PROVIDERS Providers/facilities in the Anthem Blue Cross Prudent Buyer (PPO) network	ALL OTHER PROVIDERS Any health care provider/facility you choose; however, you are responsible for paying any expenses above the Anthem Blue Cross maximum allowed amount
SEPARATE BENEFIT-YEAR DEDUCTIBLES The amount you pay before UC SHIP pays for services.	\$0	Mental Health: \$0 All other services: \$200 individual/\$400 family	Mental Health: \$0 All other services: \$750 individual/\$1,500 family
SEPARATE LIMITS ON YOUR OUT-OF-POCKET COSTS If your medical and/or pharmacy expenses reach this amount, UC SHIP will pay 100% of your covered expenses for the rest of the plan year.	\$2,000 individual/\$4,000 family Includes deductibles, coinsurance, medical copays and prescription copays	\$3,000 individual/\$6,000 family	\$6,000 individual/\$12,000 family
UC SHIP COVERS			
OFFICE VISITS Copay covers office visit only. Additional charges apply for other services, such as lab work. For details, visit ucop.edu/ucship > Plan-Documents .	SHCS <ul style="list-style-type: none"> 100% for primary care UC Family <ul style="list-style-type: none"> Primary care: 100% after \$25 copay Specialty care: 100% after \$10 copay 	Primary care: 100% after \$25 copay, deductible waived Specialty care: 100% after \$40 copay, deductible waived	60% for primary and specialty care
ROUTINE PHYSICALS/STUDENT ADULT PREVENTIVE CARE	100%	100%, deductible waived	Not covered
MENTAL HEALTH AND SUBSTANCE USE DISORDER OFFICE VISITS	SHCS: 100% UC Family: 100%, after \$5 copay	100% after \$15 copay, deductible waived	65%, deductible waived
INPATIENT HOSPITAL CARE	UCSF Medical Center: 100% All Other UC Family: 95%	90% after \$250 copay	60% after \$500 copay
URGENT CARE	UC Family: 100% after \$25 copay	100% after \$25 copay, deductible waived	60%
EMERGENCY CARE (NON-ADMISSION)	100% after \$125 copay	100% after \$125 copay, deductible waived	100% after \$125 copay, deductible waived
PEDIATRIC DENTAL AND VISION CARE Up to age 19	N/A	Dental checkup: 100%; basic and major services 50% Vision exam, frame (formulary) and standard lenses and contact lenses: 100%	Dental checkup: 100%; basic and major services 50% Vision: Up to \$30 allowance for exam, \$45 for frame and \$25 for lenses

Pharmacy Coverage

OptumRx is the pharmacy benefit administrator for UC SHIP. You can take your prescription to any pharmacy, but you'll pay the lowest costs if you take your prescription to an OptumRx network pharmacy. Certain expenses and services are excluded from Pharmacy coverage. You'll find a list on the UC SHIP site at ucop.edu/ucship > [Benefits](#) > [Pharmacy-Coverage](#) > [UCSF](#).

	NETWORK	OUT-OF-NETWORK
	OPTUMRX PHARMACIES	ALL OTHER PHARMACIES
SEPARATE ANNUAL LIMITS ON YOUR OUT-OF-POCKET COSTS	Your share of prescription drug costs count toward the combined medical/pharmacy annual out-of-pocket limit. See details in the "Medical Coverage" chart above about the combined annual out-of-pocket limit, or visit the UC SHIP website at ucop.edu/ucship .	
UC SHIP COVERS		
OUTPATIENT PRESCRIPTION DRUGS Mail Order is available	<ul style="list-style-type: none"> 100% after \$5 generic copay 100% after \$25 brand-name formulary copay, 30-day supply 100% after \$40 brand-name non-formulary copay, 30-day supply 	<ul style="list-style-type: none"> 100% after \$5 generic copay 100% after \$25 brand-name formulary copay, 30-day supply 100% after \$40 brand-name non-formulary copay, 30-day supply <i>You pay amounts exceeding OptumRx maximums.</i>

Dental Coverage

UC SHIP provides the highest benefits when you receive services from dentists in the Delta Dental PPO network. You decide how you want to manage costs by selecting a network or out-of-network dentist. Certain expenses and services are excluded from Dental coverage. You'll find a list on the UC SHIP site at ucop.edu/ucship > [Benefits](#) > [My-Dental-Coverage](#). Download the DeltaDental app (from Google Play or iTunes) to access the Delta Dental Cost Estimator tool for a real-time estimate of what you'll pay for dental work.

	DELTA DENTAL PPO NETWORK	OTHER DELTA DENTAL NETWORKS OR OUT-OF-NETWORK
ANNUAL DEDUCTIBLE The amount you are responsible to pay before UC SHIP begins paying for the services you receive.	None for preventive and diagnostic services, \$25 per person for other services	None for preventive and diagnostic services, \$50 per person for other services
ANNUAL BENEFIT MAXIMUMS The most the plan will pay out over the coverage period.	\$1,000 per member Note: Not to exceed a cumulative maximum of \$1,000 each benefit year for network plus out-of-network dental benefits in total.	\$750 per member
FEE SCHEDULE The maximum amount Delta Dental will pay for a service, sometimes called a plan allowance.	PPO providers agree to accept Delta Dental PPO maximum allowed fee schedule.	You are responsible for the difference between the amount Delta Dental pays and the amount your out-of-network dentist bills.*
UC SHIP COVERS		
PREVENTIVE AND DIAGNOSTIC SERVICES Includes: Oral exams; cleanings (once every 6 months); X-rays (one bite-wing series within 12 months); fluoride treatment	100%	80%
BASIC SERVICES Includes: Fillings and extractions; composite fillings on back teeth; endodontics (root canal); periodontics; oral surgery; night guards	80% after you pay deductible	60% after you pay deductible
MAJOR SERVICES Includes: Prosthodontics; inlays/onlays; crowns and cast restorations; implants	70% after you pay deductible	40% after you pay deductible

* Delta Dental PPO network dentists will save you the most on your care. In comparison, you will usually have the highest out-of-pocket costs when you visit an out-of-network dentist. However, Delta Dental Premier dentists will apply the approved fee schedule even though they are out-of-network, so you would have lower costs than with other out-of-network dentists.

Vision Coverage

UC SHIP covers a greater portion of your fees when you receive exams, glasses or lenses from a provider in the Anthem Blue View Vision Insight Plan network. Manage your budget wisely—if you use a retail provider, be sure to determine whether it is a network Anthem Blue View Vision Insight Plan provider before you make a purchase. Certain expenses and services are excluded from Vision coverage. You'll find a list on the UC SHIP site at ucop.edu/ucship > [Benefits](#) > [My-Vision-Coverage](#).

	ANTHEM BLUE VIEW VISION INSIGHT PLAN NETWORK	OUT-OF-NETWORK
ROUTINE EYE EXAM (PER BENEFIT YEAR)	\$10 copay	Up to the \$49 allowance
EYEGASS FRAMES (PER BENEFIT YEAR) Select an eyeglass frame and receive the following allowance toward the purchase price.	Up to \$120, then you pay 80% of costs exceeding \$120	Up to \$50, then you pay 100% of costs exceeding \$50
EYEGASS LENSES (STANDARD)	Single lenses: \$25 copay Bifocal lenses: \$25 copay Trifocal lenses: \$25 copay	Single lenses: Up to \$35 Bifocal lenses: Up to \$49 Trifocal lenses: Up to \$74
CONTACT LENSES (PER BENEFIT YEAR) Select an allowance toward the cost of a supply of contact lenses (rather than eyeglass lenses).	Conventional lenses: Up to \$120; you pay anything above \$120 with a 15% discount Disposable lenses: Up to \$120	Conventional lenses: Up to \$92 Disposable lenses: Up to \$92

This brochure provides a summary of information. For detailed information about all benefits, terms and conditions of UC SHIP, see the Benefit Booklet at ucop.edu/ucship > [Plan-Documents](#). What is written here does not constitute a guarantee of plan coverage or benefits—particular rules and eligibility requirements must be met before benefits can be received.

Anthem Blue Cross Life and Health Insurance Company provides administrative services only and does not assume any financial risk or obligation with respect to claims.

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