

Three questions to help sort student health coverage choices

May 14 2015, byTom Murphy

A key question remains for many students who've finally settled on a college destination: How will they or their parents handle health care coverage?

A doctor's office visit can cost over \$100 for someone without <u>insurance</u>. A car accident that turns into a short hospital day can quickly bury a student and his or her parents in more than \$30,000 in debt. Plus those who skip coverage may face a penalty under the federal health care overhaul.

Brokers say students heading off to school in the fall can finalize their insurance plans as late as July or August. But they should start thinking about their needs long before they begin packing for a dorm.

1—WILL THE CURRENT PLAN WORK?

Health insurance coverage comes more frequently now with a narrow network of doctors and other care providers. Patients who venture beyond those networks for care may be stuck with 50 percent of the bill or more after paying a deductible. In some cases, their plan might cover nothing.

Check with your insurer on your plan's network or at least see if it offers a ZIP code search on its website to show how far that network extends.

Learn whether your plan's network includes the main hospitals and some



doctors in the college town. If it doesn't, find out what out-of-network care would cost and how emergency care might be covered.

An independent <u>health insurance</u> broker may be helpful in sorting this out. Don't assume care will be covered.

"That is sort of the kiss of death when it comes to health insurance," said Nate Purpura, director of consumer communications for the online insurance marketplace eHealth.

2—WHAT DOES THE COLLEGE OFFER?

Many schools provide access to a campus health station for a fee. That may be worth considering as a supplement to coverage a student may bring from home, said Craig Gussin, an independent broker based in San Diego.

That way, the student has a place to go on campus if a sinus infection crops up but can save major care for home in between semesters. That may be a good choice for students who will remain covered under a parent's <u>health insurance plan</u>.

Some schools also offer <u>health insurance coverage</u>. Anyone considering that should make sure that the plan complies with minimum requirements laid out by the overhaul. That means the plan covers conditions that existed before the insurance began and it doesn't cap annual benefits, among other things.

People who don't have coverage that meets these minimum requirements may have to pay a fine for remaining uninsured.

3—WHAT ARE SOME OTHER CHOICES?



There are several ways students can buy their own insurance plan that covers them while at school. Those who work during the semester may find coverage through an employer.

If a student is independent from his or her parents and has little or no income, Medicaid may be an option. The program is geared toward covering the poor, but it can be hard finding doctors who accept it.

A short-term insurance plan offers some protection against huge medical expenses, but the coverage is not as thorough as what a person might get through an employer or find on the overhaul's public insurance exchanges. These plans also may not meet minimum coverage requirements.

Students who are independent from their parents may qualify for incomebased subsidies to help buy a more thorough plan, if they don't have access to affordable coverage through an employer.

Brokers can help students find an individual <u>insurance plan</u>. EHealth says customers ages 18 to 24 without access to help from a subsidy paid, on average, about \$161 a month for a plan with a deductible topping \$4,800. Such coverage protects against huge bills but leaves smaller expenses to the patient.

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