

*Ohio State* \_\_\_\_\_

**STUDENT LIFE  
STUDENT HEALTH  
INSURANCE  
BENEFITS PLAN  
MEMBER  
OVERVIEW**

*2019-20*

Be equipped to use  
your coverage to protect your  
well-being and your wallet





# Welcome to the SHI Benefits Plan!

*Read these highlights to learn your coverage basics.*

## NAMES TO KNOW

UnitedHealthcare StudentResources (“UHCSR”) issues your medical member ID card. UnitedHealthcare Insurance Company underwrites Tiers 2, 3 and 4 of your benefits.

HealthSmart Benefits Solutions coordinates covered services and administers claims for all benefits but adult dental. They may contact you by mail — please always reply if requested.

HealthSmart RX coordinates your prescription benefit.

Delta Dental of Ohio underwrites, issues, and coordinates your adult dental benefits and claims.

OSU Health Plan, as well as UHCSR and Delta Dental, manage networks of preferred providers that you can see at lower out-of-pocket costs.

UnitedHealthcare Global provides global emergency services if you are traveling.

### → REMEMBER!

Always carry your Member ID card or have it electronically accessible.

Read your email and postal mail and keep your local address up to date in Buckeye Link.

Make sure you follow through on your financial obligations. Even though sometimes your cost for covered services may be zero, other times you may owe a co-pay, co-insurance or deductible.

If you have questions about a bill you receive, contact your resources and ask for assistance. SHI is here to help.

## WHERE TO GO FOR CARE

### *To keep costs low:*

- Student Health Services at Wilce Student Health Center
- Counseling and Consultation Service
- Ohio State College of Optometry Clinic
- Ohio State College of Dentistry Student Clinic

### *Next try:*

- OSU Health Plan Network providers in Franklin County
- UHC Options PPO Network providers outside Franklin County
- United Behavioral Health Network providers outside Franklin County
- Delta Dental PPO/Premier network providers

Your provider choices can help you save money. Seeing providers outside of these locations and networks may result in much higher out-of-pocket costs.



## TOOLS

**uhcsr.com/osu:** view information and access your Member ID card for all benefits but adult dental

**healthsmart.com/osu.aspx:** access your medical claims to understand what's being paid

**osuhealthplan.com:** search preferred provider lists online

**deltadentaloh.com:** search providers, access a dental ID card and view adult dental claims

**Summary Brochures and Certificate of Coverage:** read full details of what's covered and what's not, available online at shi.osu.edu, uhcsr.com/OSU and deltadentaloh.com

**healthiestyou:** use 24/7 access to a licensed medical doctor regarding diagnosis and treatment of many illnesses by calling the number on your Member ID card

**betterhelp:** confidential online access to licensed mental health counselors utilizing a communication method suited to you

## TERMS

**Co-pay:** flat fee owed at the time you use a covered service.

**Co-insurance:** percentage you pay of the covered service cost.

**Deductible:** dollar amount you pay up front before the plan starts to pay for most covered services.

**Out-of-pocket maximum:** most you'll pay each year for covered services, excluding your SHI fee.

# MEDICAL BENEFITS

UnitedHealthcare Insurance Company underwrites Tiers 2, 3 and 4.

You can reduce your cost responsibility  
if you choose providers in  
Tier One or Tier Two.

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TIER ONE <i>(Enhanced)</i>	TIER TWO <i>(Preferred Providers)</i>	TIER THREE <i>(In Network)</i>	TIER FOUR <i>(Out of Network)</i>
Student Health Services at Wilce Student Health Center	In Franklin County: OSU Health Plan Network  Outside Franklin County: UHC Options PPO Network	In Franklin County: UHC Options PPO Network but not OSU Health Plan Network	All other providers

Your out-of-pocket costs increase at providers in Tiers Three and Four.

Search options at [shi.osu.edu](http://shi.osu.edu) > Find a Provider. Contact OSU Health Plan **614-292-4700** or HealthSmart **1-844-206-0374**.

***If it's a life-threatening emergency, always go to the nearest hospital or call 9-1-1.***

## Notes!

- For Tiers 2 and 3, plan pays % of Preferred Allowance; for Tier 4, plan pays % of Usual and Customary Charges.
- Benefits for covered services incurred while traveling outside the USA will be applied at Tier 2.

## CAUTION:

This is not a complete list of benefits or limitations and exclusions.

Visit [uhcsr.com/osu](http://uhcsr.com/osu) or [shi.osu.edu](http://shi.osu.edu) to access your Summary Brochure and Certificate of Coverage.

	STUDENTS ONLY		STUDENTS AND DEPENDENTS	
	TIER ONE <i>Plan Pays</i>	TIER TWO <i>Plan Pays</i>	TIER THREE <i>Plan Pays</i>	TIER FOUR <i>Plan Pays</i>
Office Visits	100%	100% after \$20 co-pay	60%	60%
Diagnostic Lab test and X-ray	100%	90%	60%	60%
Rehabilitative and Habilitative Therapies	100% <sup>1</sup> up to policy year visit limit	90% up to policy year visit limit	60% up to policy year visit limit	60% up to policy year visit limit
Allergy Testing, Treatment and Injections	100% excluding serum	Based on setting where service is performed.	Based on setting where service is performed.	Based on setting where service is performed.
Surgery and Outpatient procedures	100%	90%	60%	60%
Urgent Care Office Visits <sup>2</sup>	N/A	100% after \$25 co-pay	60%	60%
Emergency Care	N/A	90% after \$100 co-pay. Copay will be waived if admitted.		
Ambulance	N/A	90%	90%	90%
Inpatient and Outpatient Hospital care	N/A	90%	60%	60%
Durable Medical Equipment, Prosthetic and Orthotic Devices	100% <sup>3</sup>	90%	60%	60%
<p><b>→ APPLICABLE LIMITATIONS TO BENEFITS ABOVE</b></p>				
Policy Year Maximum Benefits	N/A	UNLIMITED		
Policy Year Deductible	N/A	\$150 per Individual; \$350 per family	\$500 per individual; \$1,500 per family	
Policy Year Out-of-Pocket Maximum	N/A	\$2,700 individual; \$5,400 family	\$6,000 individual; \$12,000 family	

<sup>1</sup>Not all covered services are available at Student Health Services.

<sup>2</sup>Additional services rendered during an urgent care office visit will be paid per category schedule. For example: An X-Ray will be paid at 90% at Tier Two providers and 60% at Tiers Three and Four.

<sup>3</sup>Covered when in stock and ordered by a Student Health Services provider.



# PREVENTIVE BENEFITS

Preventive care is routine care given to help you avoid illness and improve your health. Benefits highlighted on this page are for adults age 19 years or older. For members 18 years or younger, refer to the full Summary Brochure and Certificate of Coverage available on [shi.osu.edu](http://shi.osu.edu) or [uhcsr.com/osu](http://uhcsr.com/osu).

**IMPORTANT:** Your age, gender, history and risk status determine what preventive care services are covered for you. Make sure to talk with your doctor about what's recommended.

Preventive care guidelines are shaped by the Patient Protection and Affordable Care Act (PPACA), United States Preventive Service Task Force (USPSTF), and the Advisory Committee on Immunization Practices (ACIP), as well as the Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS), and the Centers for Disease Control and Prevention (CDC).

You can reduce your cost responsibility if you choose providers in **Tier One** or **Tier Two**.

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TIER ONE <i>(Enhanced)</i>	TIER TWO <i>(Preferred Providers)</i>	TIER THREE <i>(In Network)</i>	TIER FOUR <i>(Out of Network)</i>
Student Health Services at Wilce Student Health Center	In Franklin County: OSU Health Plan Network  Outside Franklin County: UHC Options PPO Network	In Franklin County: UHC Options PPO Network but not OSU Health Plan Network	All other providers

Your out-of-pocket costs increase at providers in Tiers Three and Four.

Search options at [shi.osu.edu](http://shi.osu.edu) > Find a Provider. Contact OSU Health Plan **614-292-4700** or HealthSmart **1-844-206-0374**.

## CAUTION:

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Visit [uhcsr.com/osu](http://uhcsr.com/osu) or [shi.osu.edu](http://shi.osu.edu) to access your Summary Brochure and Certificate of Coverage.

**Notes!**



- UnitedHealthcare Insurance Company underwrites Tiers 2, 3, and 4. For Tiers 2 and 3, plan pays % of Preferred Allowance; for Tier 4, plan pays % of Usual and Customary Charges.
- Benefits for covered services incurred while traveling outside the USA will be applied at Tier 2.
- Pre-travel assessments are not covered.

<sup>1</sup>As required or recommended by PPACA/USPSTF/ACIP or the State of Ohio, including: influenza, hepatitis A, hepatitis B, Td/Tdap, varicella, meningococcal, MMR, pneumococcal, zoster and HPV.

<sup>2</sup>Covered services are those rated A or B by the USPSTF.

<sup>3</sup>Covered well woman services are per PPACA/USPSTF guidelines, including screenings for cervical cancer, chlamydia, gonorrhea, syphilis, HIV and HPV.

<sup>4</sup>As required or recommended by PPACA or the State of Ohio.

 After you meet the Tier 4 deductible.	STUDENTS ONLY		STUDENTS AND DEPENDENTS	
	TIER ONE <i>Plan Pays</i>	TIER TWO <i>Plan Pays</i>	TIER THREE <i>Plan Pays</i>	TIER FOUR <i>Plan Pays</i>
Adult Immunizations <sup>1</sup>	100%	100%	100%	60%
Annual well visit <sup>2</sup>	100%	100%	100%	60%
Annual well woman visit <sup>3</sup>	100%	100%	100%	60%
Breast Cancer Screening <sup>4</sup>	100%	100%	100%	60%
Colorectal Cancer Screening <sup>2</sup>	100%	100%	100%	60%
Testicular and Prostate Cancer Screening <sup>2</sup>	N/A	100%	100%	60%
Immunizations and screening laboratory tests required by Ohio State academic programs	50%	NOT COVERED		
 <b>APPLICABLE LIMITATIONS TO BENEFITS ABOVE</b>				
Policy Year Maximum Benefits	N/A	UNLIMITED		
Policy Year Deductible			N/A	\$500 individual; \$1,500 family
Policy Year Out-of-Pocket Maximum	N/A	\$2,700 individual; \$5,400 family	\$6,000 individual; \$12,000 family	

# PRESCRIPTION BENEFITS

The prescription benefit uses the HealthSmart RX formulary, which is a list of covered medications (generic and brand) organized by how they'll be paid. You can access the formulary at [shi.osu.edu](http://shi.osu.edu) and [healthsmart.com/osu.aspx](http://healthsmart.com/osu.aspx), or call **HealthSmart Rx** at **1-800-681-6912**.

## Notes!

- Minimum cost per prescription does not apply to generic and brand (no generic available) contraceptive drugs.
- Specialty drugs must be filled through Accredo Specialty Pharmacy and cannot be filled at the Student Health Center or other pharmacy locations. Call **Accredo** at **1-877-222-7336**.

When you fill a prescription at the Wilce Student Health Center Pharmacy or any HealthSmart RX Network Pharmacy, you pay only the co-insurance and applicable minimum cost. At a Non-Network pharmacy, you pay in full first and then submit a claim form for reimbursement of the plan portion.

## → Wilce Student Health Center Pharmacy

1875 Millikin Rd  
614-292-0125





## CAUTION:

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Visit [uhcsr.com/osu](http://uhcsr.com/osu) or [shi.osu.edu](http://shi.osu.edu) to access your Summary Brochure and Certificate of Coverage.



	STUDENTS AND DEPENDENTS		
	<b>Wilce Student Health Center Pharmacy</b> <i>Plan Pays</i>	<b>HealthSmart RX Network Pharmacy</b> <i>Plan Pays</i>	<b>Non-Network Pharmacy</b> <i>Plan Pays</i>
Generic	90%	90%	90%
Formulary Brand	80%	80%	50%
Non-Formulary Brand or Dispense-As-Written	50%	50%	50%
 <b>WOMEN'S CONTRACEPTIVE DRUGS</b>			
Generic and Brand (no Generic Available)	100%	100%	90%
Brand (Generic Available)	50%	50%	50%
 <b>ADDITIONAL LIMITATIONS TO BENEFITS ABOVE</b>			
Fill supply	Most medications up to 31-day supply		
Minimum Cost Per Prescription	\$10, not to exceed the drug cost		
Policy Year Maximum Benefit	N/A	Unlimited	
Policy Year Out-of-Pocket Maximum	\$2,700 per individual/\$5,400 per family		\$6,000 per individual / \$12,000 per family



# MENTAL HEALTH BENEFITS

*UnitedHealthcare Insurance Company underwrites Tiers 2, 3 and 4.*

Students and covered dependents age 14 and older can utilize Counseling and Consultation Service (CCS). For children under age 14, seek an OSU Health Plan provider inside Franklin County or a United Behavioral Health provider outside Franklin County.

**You can reduce your cost responsibility if you choose providers in**

**Tier One or Tier Two.**

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TIER ONE <i>(Enhanced)</i> \$	TIER TWO <i>(Preferred Providers)</i>	TIER THREE <i>(In Network)</i>	TIER FOUR <i>(Out of Network)</i>
Counseling and Consultation Service	In Franklin County: OSU Health Plan Network  Outside Franklin County: UHC Options PPO Network	In Franklin County: UHC Options PPO Network but not OSU Health Plan Network	All other providers

Your out-of-pocket costs increase at providers in Tiers Three and Four.

Search options at [shi.osu.edu](http://shi.osu.edu) > Find a Provider. Contact OSU Health Plan **614-292-4700** or HealthSmart **1-844-206-0374**.

***If it's a life-threatening emergency, always go to the nearest hospital or call 9-1-1.***

→ CCS at Younkin Success Center  
Fourth Floor  
1640 Neil Ave

CCS at Lincoln Tower  
Tenth Floor  
1800 Cannon Drive

614-292-5766  
[ccs.osu.edu](http://ccs.osu.edu)



*Counseling and Consultation Service offers individual and group psychotherapy, couples counseling, urgent care during normal business hours and limited psychiatry services.*

**Notes!**

- For Tiers 2 and 3, plan pays % of Preferred Allowance; for Tier 4, plan pays % of Usual and Customary Charges.
- Benefits for covered services incurred while traveling outside the USA will be applied at Tier 2.

**CAUTION:**

This is not a complete list of benefits or limitations and exclusions.

Visit [uhcsr.com/osu](http://uhcsr.com/osu) or [shi.osu.edu](http://shi.osu.edu) to access your Summary Brochure and Certificate of Coverage.

<sup>1</sup>Under age 14 and including alcohol or drug abuse.

	STUDENTS AND DEPENDENTS			
	TIER ONE <i>Plan Pays</i>	TIER TWO <i>Plan Pays</i>	TIER THREE <i>Plan Pays</i>	TIER FOUR <i>Plan Pays</i>
<div style="display: flex; align-items: flex-start;"> <div style="width: 20px; height: 20px; background-color: #e67e22; margin-right: 5px;"></div> <div style="font-size: 0.8em; margin-bottom: 5px;">This service is subject to Tier 2 deductible.</div> </div> <div style="display: flex; align-items: flex-start;"> <div style="width: 20px; height: 20px; background-color: #27ae60; margin-right: 5px;"></div> <div style="font-size: 0.8em; margin-bottom: 5px;">This service is subject to Tier 3 and Tier 4 deductibles.</div> </div>				
Outpatient Psychotherapy	100%	100% after \$20 co-pay	60%	60%
Outpatient Psychotherapy for Alcohol or Drug Abuse	100%	100% after \$20 co-pay	60%	60%
Outpatient Psychiatry	100%	100% after \$20 co-pay	60%	60%
Outpatient Child <sup>1</sup> Psychotherapy or Psychiatry	N/A	100% after \$20 co-pay	60%	60%
Inpatient Psychotherapy or Psychiatry	N/A	90%	60%	60%
Testing for Learning Disabilities/ADHD	N/A	90%	60%	60%
<p><b>→ APPLICABLE LIMITATIONS TO BENEFITS ABOVE</b></p>				
Policy Year Maximum Benefits	UNLIMITED			
Policy Year Deductible	N/A	\$150 per individual; \$350 per family	\$500 per individual; \$1,500 per family	
Policy Year Out-of-Pocket Maximum	N/A	\$2,700 individual; \$5,400 family	\$6,000 individual; \$12,000 family	



# VISION BENEFITS

*UnitedHealthcare Insurance Company underwrites Tiers 2, 3 and 4.*

Pediatric vision benefits for members under age 19 and benefits to diagnose or treat an eye disease or injury are covered under the pediatric vision medical benefit, with details available in the full Summary Brochure and Certificate of Coverage available at [shi.osu.edu](http://shi.osu.edu) or [uhcsr.com/osu](http://uhcsr.com/osu). At vision providers, show your UHCSR Member ID card.

**You can reduce your cost responsibility if you choose providers in Tier One or Tier Two.**

\$	\$\$	\$\$\$	\$\$\$\$
<b>TIER ONE</b> <i>(Enhanced)</i>	<b>TIER TWO</b> <i>(Preferred Providers)</i>	<b>TIER THREE</b> <i>(In Network)</i>	<b>TIER FOUR</b> <i>(Out of Network)</i>
Wilce Student Health Center Optometry Services  Ohio State College of Optometry Clinics.	In Franklin County: OSU Health Plan Network  Outside Franklin County: UHC Options PPO Network	In Franklin County: UHC Options PPO Network but not OSU Health Plan Network	All other providers

Your out-of-pocket costs increase at providers in Tiers Three and Four.

Search options at [shi.osu.edu](http://shi.osu.edu) > Find a Provider. Contact *OSU Health Plan* **614-292-4700** or *HealthSmart* **1-844-206-0374**.

***If it's a life-threatening emergency, always go to the nearest hospital or call 9-1-1.***

→ **Wilce Student Health Center Optometry Service**

1875 Millikin Rd  
 Second Floor  
 614-292-4321

**Ohio State College of Optometry Clinics**

Fry Hall 338 W. 10th Ave.  
 614-292-2020




**Notes!**

- At Tier 1, students receive an allowance of \$100 towards eyewear or contact lenses. They also receive a 20% discount on frames and eyeglass lenses.
- For Tiers 2 and 3, plan pays % of Preferred Allowance; for Tier 4, plan pays % of Usual and Customary Charges.
- Benefits for covered services incurred while traveling outside the USA will be applied at Tier 2.

**CAUTION:**

This is not a complete list of benefits or limitations and exclusions.

Visit [uhcsr.com/osu](http://uhcsr.com/osu) or [shi.osu.edu](http://shi.osu.edu) to access your Summary Brochure and Certificate of Coverage.

	STUDENTS ONLY		STUDENTS AND DEPENDENTS 19 YEARS OR OLDER	
	TIER ONE <i>Plan Pays</i>	TIER TWO <i>Plan Pays</i>	TIER THREE <i>Plan Pays</i>	TIER FOUR <i>Plan Pays</i>
Annual Vision Exam	100% after \$15 copay		100% up to \$50 after \$20 copay	
Annual Vision Exam with Contact Lens Evaluation	100% after \$15 copay and \$25 copay for CL evaluation		100% up to \$50 after \$20 copay	
<p> <b>APPLICABLE LIMITATIONS TO BENEFITS ABOVE</b></p>				
Policy Year Maximum Benefits	N/A	\$50	\$50	\$50
Policy Year Out-of-Pocket Maximum	N/A	\$2,700 individual; \$5,400 family	\$6,000 individual; \$12,000 family	
Policy Year Deductible	N/A	\$150 per Individual; \$350 per family	\$500 per individual; \$1,500 per family	

# ADULT DENTAL BENEFITS

*Dental benefits are underwritten by Delta Dental.*

Primary pediatric dental benefits for members under 19 years of age are covered under the medical benefit and underwritten by UnitedHealthcare Insurance Company with a separate \$500 deductible. There is also secondary pediatric dental coverage underwritten by Delta Dental of Ohio. Details are available at [shi.osu.edu](http://shi.osu.edu) and [uhcsr.com/osu](http://uhcsr.com/osu).

→ Ohio State College  
of Dentistry  
Student Clinics

Postle Hall  
305 W. 12th Ave.  
614-292-2751

Ohio State College of  
Dentistry Faculty Practice  
614-292-1472




**Wilce Student Health Center Dental Services**  
**Second Floor 1875 Millikin Rd.**  
**614-292-4321**

## **CAUTION:**

This is not a complete list of benefits or limitations and exclusions.

Visit [shi.osu.edu](http://shi.osu.edu) to access your Summary Brochure and Certificate of Coverage.

## STUDENTS AND DEPENDENTS 19 YEARS OR OLDER

	Student Health Services <sup>1</sup> or College of Dentistry Student Clinic <i>Plan Pays</i>	College of Dentistry Faculty Practice or Delta Dental PPO/Delta Premier Network <i>Plan Pays</i>	Non-Network <i>Plan Pays</i>
<b>Diagnostic and Preventive Services</b> Exams and cleanings twice per benefit year; fluoride treatment for dependent children once per benefit year.	100% after \$17 co-pay	70%	50%
<b>Emergency Exam and Palliative Treatment</b> Used to temporarily relieve pain.	100% after \$17 co-pay	70%	50%
<b>Radiographs (X-rays)</b> Bitewing X-rays are payable once per benefit year. Full-Mouth X-rays are payable once per five benefit years.	100%	70%	50%
<b>Simple Extractions</b>	70%	50%	50%
<b>Oral Surgery Services</b> Surgical extractions. Coverage for the removal of asymptomatic third molars is excluded.	70%	50%	NOT COVERED
<b>Minor Restorative Services</b> Used to repair teeth damaged by disease or injury (for example, amalgam [silver] and resin [white] fillings).	70%	50%	50%
<b>Single Crown</b>	50%	50%	50%
<b>Periodontic Services</b> Used to treat diseases of the gums and supporting structures of the teeth.	70%	50%	50%
<b>Endodontic Services</b> Limited to root canals only.	50%	50%	50%
<b>Anesthesia IV sedation.</b>	50%	50%	NOT COVERED
 <b>APPLICABLE LIMITATIONS TO BENEFITS ABOVE</b>			
Policy Year Maximum Benefits	\$750 per individual		
Policy Year Deductible	N/A	\$50	

<sup>1</sup> Non-student dependents are not eligible at this location



# ADDITIONAL BENEFITS

## *Medical and Mental Health Online resources available to you:*

The medical policy partner, UHCSR offers two online resources for non-emergency medical and mental health care. Both of these services are available as an additional resource to the care you have available on campus at the Wilce Student Health Center and/or Counseling and Consultation Service.

### ➔ **HEALTHIESTYOU**

Healthiestyou provides you with round-the-clock access to board-certified physicians. When you are unable to visit the Wilce Student Health Center during open hours, they can connect you with a board-certified physician using this nationwide telehealth service.

### ➔ **BETTERHELP**

BetterHelp is a confidential virtual counseling service, providing access to Psychologists (PhD / PsyD), Marriage and Family therapists (LMFT), Clinical Social Workers (LCSW) and Licensed Professional Counselors (LPC). These professional licensed counselors are available to you to schedule an appointment and decide on a communication method that best suits your needs: including ongoing text communications, live chat, phone, video or groupinars.

➔ **Go to [www.telehelp4students.com](http://www.telehelp4students.com) for more information or to access services.**



## ➔ EMERGENCY TRAVEL ASSISTANCE BENEFITS

As part of your Student Health Insurance Plan, you, your insured spouse/domestic partner, and your insured minor child(ren) are eligible for Global Emergency Services.\*

International students are eligible to receive services worldwide, except in your home country.

Domestic students are eligible to received services when 100 miles or more away from your campus address or 100 miles or more away from your permanent home address or while participating in a study abroad program.

### Key Medical Evacuation and Repatriation benefits include: .....

- Emergency Medical Evacuation
- Dispatch of Doctors/Specialists
- Medical Repatriation
- Transportation after Stabilization
- Transportation to Join a Hospitalized Insured Person
- Return of Minor Children
- Repatriation of Mortal Remains
- Additional Assistance Services to support you while away from home

To access services, please refer to the contact information on the back of your ID card or access My Account at [www.uhcsr.com/MyAccount](http://www.uhcsr.com/MyAccount) and select My Benefits/Additional Benefits/UHC Global Emergency Services.

**All services must be arranged and provided by the Emergency Response provider; any services not arranged by the Emergency Response provider will not be considered for payment.** The Assistance and Evacuation Benefits and related services are not meant to be used in lieu of or replace local emergency services. If the condition is an emergency, you should go immediately to the nearest physician or hospital without delay and then contact the 24-hour Emergency Response Center. Appropriate action to assist you and monitor your care will be taken at that time.

**\*Underwritten by UnitedHealthcare Insurance Company. Check your Certificate of Coverage for a description of the benefits, services, exclusions and limitations.**

Your student health insurance program also gives you access to evacuation services in the event of a political emergency situation or natural disaster. Contact Assist America at **1-855-289-2616** (inside USA) or **+1-609-986-1212** (outside USA) if you need assistance on these services.

Lastly, as a student of The Ohio State University, you also have access to special Emergency Travel Assistance benefits. These benefits include Emergency Return Home, Return of Personal Belongings, Bereavement Reunion and Return of Traveling Companion. To learn more about these benefits, or to request these services, please visit the Student Health Insurance office.



## ➔ Campus area resources:

Wilce Student Health Center  
1875 Millikin Road  
614-292-4321  
shs.osu.edu

Counseling and Consultation  
Service  
Younkin Success Center 4th Floor  
& Lincoln Tower 10th Floor  
614-292-5766  
ccs.osu.edu

Student Life Student Wellness  
Center  
B130 RPAC  
614-292-4527  
swc.osu.edu

Center for Integrative Medicine  
2000 Kenny Rd. 614-293-9777

Center for Women's Health at  
The Ohio State University Wexner  
Medical Center  
McC Campbell Hall, 3rd Floor 1581  
Dodd Dr.  
614-293-2076

Martha Morehouse Medical Plaza  
2050 Kenny Rd (Accessible by  
Campus Transport)

AfterHoursCare  
2nd Floor, Suite 2250, Pavilion  
614-685-3357

Ohio State Internal Medicine  
614-293-8054

OSU Sports Medicine Center  
2835 Fred Taylor Drive  
614-293-3600

Rardin Family Practice  
2231 N. High St.  
614-293-2700

## ➔ Regional or commuter student looking for providers outside Franklin County?

The UnitedHealthcare Options PPO network has extensive listings.  
Visit [shi.osu.edu](http://shi.osu.edu)'s Find a Provider page or [uhcsr.com/osu](http://uhcsr.com/osu) or call HealthSmart 1-844-206-0374.

## ➔ Contact information

Office of Student Life  
Student Health Insurance  
830 Lincoln Tower  
1800 Cannon Drive  
Columbus, OH 43210

Visit: [shi.osu.edu](http://shi.osu.edu)  
Email: [shi\\_info@osu.edu](mailto:shi_info@osu.edu)  
Call: 614-688-7979  
Hours: Mon–Fri, 8 a.m.–5 p.m.





# THE OHIO STATE UNIVERSITY

OFFICE OF STUDENT LIFE

STUDENT HEALTH INSURANCE

Note: The student health insurance information contained herein is a summary of certain benefits which are offered under a student health insurance policy issued by UnitedHealthcare and based on policy numbers 2019-1098-1 and 2019-1098-4. This document is a summary only and may not contain a full or complete recitation of the benefits and restrictions/exclusions associated with the relevant policy of insurance. This document is not an insurance policy document and your receipt of this document does not constitute the issuance or delivery of a policy of insurance. Neither you nor UnitedHealthcare has any rights or responsibilities associated with your receipt of this document. Changes in federal, state, or other applicable legislation or regulation or changes in Plan design required by the applicable state regulatory authority may result in differences between this summary and the actual policy of insurance. The policies provide one year term insurance coverage.