

Dear UO Student Health Benefits Plan Member,

The Patient Protection and Affordable Care Act includes a requirement for each individual to either have Minimum Essential Coverage (MEC) for each month, qualify for an exemption, or make a payment when filing his or her federal income tax return. The University of Oregon is pleased to announce that the UO Student Health Benefit Plans (Domestic and International) have been recognized as MEC beginning with the 2016-17 plan year. You will receive Form 1095B from the University of Oregon. This form provides information to report on your federal taxes to confirm you, and, if enrolled, your spouse (if you file a joint return) and individuals you claim as dependents had MEC for the months covered under the plan in 2016.

In order to attain recognition, we have made the following enhancements to the plan, which are retroactive to August 10, 2016.

- The plan language was enhanced to clarify that clinical trials funded by the Department of Energy are included in the definition of approved clinical trials.
- Plan language was enhanced to affirm that any member participating in an approved clinical trial who experiences a consequential health condition directly caused by an approved clinical trial, services and associated costs are covered under this Student Plan as comparable services.
- The plan language has been enhanced to clarify that all USPSTF A and B Recommendations and HRSA required drugs that are prescribed by the member's provider are eligible for coverage.
- The plan was enhanced to allow for coverage of contraceptive devices that are available over the counter and are prescribed by the member's provider.
- The plan language was enhanced to clarify that while there are some exceptions to coverage of over-the-counter medications or nonprescription drugs, there is coverage for over-the-counter preventive care services that are prescribed by the member's provider.
- The plan document was enhanced to clarify that an eligible child, placed in your, your spouse's, or your qualified domestic partner's court appointed legal guardianship is not limited based on their marital status or domestic partnership status. They are eligible until they reach age 26. Applicable to international student plan only.
- Coverage for 'Medical Emergency Services' was increased at the Tier Two and Non-Participating levels to match the University District Network level of \$75 co-pay/visit, then 10% co-insurance. Medical Emergency Services received at an Emergency Room are the same regardless of what tier provider the member receives care.
- The plan document was enhanced to specifically include coverage of a routine ophthalmologic exam with refraction as well as dilation.
- The plan document was enhanced to specifically include coverage for your choice of glass or plastic lenses, all lens powers (single vision, bifocal, trifocal, lenticular), fashion and gradient tinting, oversized and glass-grey #3 prescription sunglass lenses, as well as polycarbonate lenses and scratch resistant).
- The plan document was enhanced to specifically include coverage of medically necessary contact lenses for Keratoconus, Pathological Myopia, Aphakia, Anisometropia, Aniseikonia, Aniridia, Corneal Disorders, Post-traumatic Disorders, and Irregular Astigmatism.
- The plan document was enhanced to specifically include coverage of low vision services.
- The plan document was enhanced to clarify that hearing aids are covered when deemed medically necessary and are not subject to age-based limitations. There are other limits in place; see plan document for details.
- The plan document was enhanced to provide clarification of coverage available on a secondary basis for expenses incurred from the practice or play of NCAA-sanctioned intercollegiate sports.
- The plan was enhanced to provide coverage for up to 30 visits per year for outpatient rehabilitation and 30 visits per year for outpatient habilitation services.
- The plan was enhanced to provide coverage for up to 30 visits per year for inpatient rehabilitation and 30 visits per year for inpatient habilitation services.
- The plan was enhanced to provide up to 60 days of treatment per year for head or spinal cord injuries.

If you would like to review these changes in detail, please refer to the plan documents (including a redline version) on the University Health Center website, under "Insurance". If you feel that you have a claim which may need to be reprocessed, please contact customer service at PacificSource (855-274-9816) to discuss your situation and learn how to get any claims reviewed.

Thank you.

UO Student Health Benefits Plan
University Health Center
541-346-2832

<http://healthcenter.uoregon.edu/insurance>