5-6 STUDENT INSURANCE REQUIREMENT

Responsible Executive:

Jim Clark, Provost and Executive Vice President for Academic Affairs

Amy Hecht, Vice President for Student Affairs

Approving Official: Jim Clark, Provost; Amy Hecht, Vice President for Student Affairs

Effective Date: 4/1/24

Revision History: New, 4/1/24

I. INTRODUCTION

Recognizing that access to affordable, routine healthcare and emergency medical services is important to student retention, Florida State University has required insurance coverage for all students at the FSU main campus as a condition of full-time enrollment since 2007. Additionally, the Board of Governors for the State University System requires Florida State University to ensure that students studying in F-1, J-1, F-2, or J-2 status have medical insurance that meets certain requirements listed in BOG regulation 6.009. The university insurance requirement has the added benefit of keeping the annual premium for the school sponsored insurance plan relatively affordable year to year, due to consistent plan enrollment.

Up to the 2022-2023 academic year, the university has utilized a waiver system that relies upon a student knowing and accurately relaying the details of their insurance coverage. An audit revealed thousands of students with unable to verify insurance information, indicating these students had no insurance coverage. To ensure that all students have access to affordable routine and emergency care, this policy establishes a process to enroll in the school sponsored insurance plan all full time domestic students at FSU and all International FSU students who are in active degree programs as defined in this policy with limited waiver and exemption options.

II. POLICY (Including any Forms and Attachments)

A. Overview:

Most Florida State University students are required to have minimum essential coverage under the Patient Protection and Affordable Care Act (ACA). Students in active academic programs who hold F-1, F-2, J-1, or J-2 status additionally must demonstrate that their coverage also complies with the Board of Governors regulation 6.009 which dictates additional benefit requirements. This Board of Governors regulation places the onus for compliance on Florida State University,

instructing that the university may not allow a student holding F-1, F-2, J-1, or J-2 to enroll in coursework without verifying the student's compliance with BOG regulation 6.009. In order to ensure that students are enrolled in insurance that meets all applicable federal and state insurance requirements, full time domestic students and International students with active degree programs will be automatically enrolled in the FSU-sponsored insurance plan as outlined in this policy. Students who can demonstrate verifiable coverage that complies with the ACA and, if applicable, BOG regulation 6.009 may submit a request for a waiver as outlined in the policy procedures.

B. Procedures:

All full time domestic and International students who are identified as having an active, primarily in-person academic program at the end of the previous semester will be automatically enrolled in the FSU-sponsored insurance plan on July 15 of each year for Fall and December 1 for Spring/Summer. Students who begin a new degree program in a summer semester will be enrolled in the FSU-sponsored insurance plan on June 1.

Up until the second week of classes each semester, students can request that they be unenrolled in the school sponsored insurance plan by completing a waiver request and receiving approval. The waiver may be granted if:

- No claims have been made on the school sponsored plan for the current semester;
- The student is enrolled in an alternate ACA-compliant insurance plan. The University will determine ACA compliance to be those plans that include sufficient access to local network providers.
- If the student holds active F-1, J-1, F-2, or J-2 immigration status, their alternate ACA-compliant insurance additionally meets the following requirements:
 - Coverage Period: Policies must provide, at a minimum, continuous coverage for the entire period the insured is enrolled as an eligible student, including annual breaks during that period. Payment of benefits must be renewable;
 - O Basic Benefits: Room, board, hospital services, physician fees, surgeon fees, ambulance, outpatient services, and outpatient customary fees must be paid at 80% or more of usual, customary, reasonable charge per accident or illness, after deductible is met, for in-network, and 60% or more of usual, customary, and reasonable charge for out-of-network providers per accident or illness:
 - Inpatient Mental Health Care: Must be paid at 80% in-network or 60% out-of-network of the usual and customary fees with a minimum 30-day cap per benefit period;
 - Outpatient Mental Health Care: Must be paid at 80% in-network or 60% out-of-network of the usual and customary fees for a minimum of 30 (preferably 40) sessions per year;
 - Maternity Benefits: Must be treated as any other temporary medical condition and paid at no less than 80% of usual and customary fees in-network or 60% out-of-network;

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- Repatriation: \$25,000 (coverage to return the student's remains to his/her native country);
- Medical Evacuation: \$50,000 (to permit the patient to be transported to his/her home country and to be accompanied by a provider or escort, if directed by the physician in charge);
- Deductible: Maximum of \$50 per occurrence if treatment or services are rendered at the University Health Services; maximum of \$100 per occurrence if treatment or services are rendered at an off-campus ambulatory care or hospital emergency department facility;
- Minimum coverage: \$100,000 for covered injuries/illnesses per accident or illness per policy year;
- Insurance Carrier must, at a minimum, meet the rating requirements specified in Part 62.14(d) of Title 22 of the Code of Federal Regulations;
- O Policy must not unreasonably exclude coverage for perils inherent to the student's program of study or the student experience;
- Claims must be paid in U.S. dollars payable on a U.S. financial institution;
- o Policy provisions must be available from the insurer in English.

Students in F-1, J-1, F-2, or J-2 status who are enrolled in non-degree or transient academic programs may request a waiver based upon a short-term, limited duration insurance plan that meets BOG 6.009 but is not ACA-compliant.

Students in J-1 status who are enrolled in an insurance plan provided by the U.S. State Department may request a waiver provided the plan meets BOG 6.009.

Students who are covered in the state of Florida by Medicaid, Medicare, or CHIP may submit a waiver request based upon this coverage.

When a student requests a waiver, they will be required to provide their insurance plan name, policy number, dates of validity, and specific benefits provided. The information will be verified through a clearinghouse and/or direct communication with the insurer when necessary. Students must submit permission for the school to share certain personally identifiable information to verify coverage and for the insurer to share information with FSU.

The following students are exempt from automatic enrollment in the school sponsored plan and the requirement to submit a waiver:

- Students enrolled in a completely online/distance-learning degree program;
- Students enrolled in the Republic of Panama campus;
- Domestic students enrolled in the Panama City and Sarasota Campuses
- Students who are enrolled in the FSU study centers who are <u>not</u> U.S. citizens, U.S. permanent residents, or students maintaining F-1, J-1, F-2, or J-2 visa status while studying abroad.
- Students who are enrolled part-time at any FSU campus (less than 12 credit hours for undergraduate students, less than 9 credit hours for graduate students), unless they are maintaining F-1, J-1, F-2, or J-2 status.

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III. LEGAL SUPPORT, JUSTIFICATION, AND REVIEW OF THIS POLICY

BOG 1.001(4), 6.009 FSU BOT Program Approval, May 26, 2005 Informal Attorney General Opinion Letter, May 1, 2007

/s/ Dr. Amy Hecht

V.P Student Affairs

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