



JOHNS HOPKINS
UNIVERSITY

2022/2023 Student Health Insurance Plan (SHP) Frequently Asked Questions





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GETTING STARTED

Where can I learn about the Student Health Insurance Plan (SHP)?

Click on the *My Benefits and Plan Information* on the Gallagher Student Portal.

How do I log in?

Access the Gallagher Student Portal through SIS.

ENROLLING IN MY SHP

Am I required to enroll in student health insurance?

All School of Nursing students in degree and certificate programs are required to have health insurance coverage. Due to the requirements of your program, you have been enrolled in the Johns Hopkins SHP. You may also choose to enroll your dependents. If eligible to waive, please see waiver requirements and process under [Waiving the SHP Coverage](#) below.

When Can I Enroll My Dependents?

- Summer 1 and Summer 2 students can add dependents to their SHP through June 30, 2022.
- New and returning students can add dependents to their SHP from July 1, 2022 to September 30, 2022.
- Spring students can add dependents to their SHP from December 1, 2022 to February 10, 2023.

How do I enroll my dependents?

If your dependents were enrolled in your 2021-22 academic year student health plan, their enrollment will continue for the 2022-23 academic year automatically.

During the open enrollment period, you may click on the green button “Enroll Yourself and Any Dependents in Health Insurance” or click the “Health Insurance Enrollment Form” link on the left toolbar under “Student Access” and add information about any additional dependents.

To remove any dependents from your existing coverage, complete an Enrollment Status Change Request found under the Forms and Applications link.

Can I enroll my dependents outside of the open enrollment period?

You can only add eligible dependent(s) outside of the enrollment period if one of these qualifying events occurs:

- You get married

- You have or adopt a child
- You get divorced
- Your dependent enters the country for the first time
- Your dependent loses coverage under another insurance plan

In such cases, you must complete and submit an Enrollment Status Change Request found under the Forms and Applications link within 30 days of the qualifying event. If approved, coverage for your dependents will start on the date of the qualifying event. Your premium will be pro-rated. Requests received after 31 days will not be processed.

Once enrolled, can I cancel? Get a refund?

You will remain enrolled in SHP for the entire coverage period, unless you waive the SHP requirement described in [Waiving the SHP Coverage](#) below, or you experience a qualifying event. For a qualifying event, complete and submit an Enrollment Status Change Request found under the Forms and Applications link within 30 days of the qualifying event. If approved, your coverage will end on the last day of the month of the qualifying event, and any previously-billed future charges will be credited to your account.

ABOUT MY BENEFITS

What do my benefits include?

Your SHP is fully compliant with the Affordable Care Act (ACA) and all other federal and state mandates. It pays for a wide range of medical services, including hospital room and board, inpatient and outpatient surgical procedures, labs and x-rays, chemotherapy and radiation, inpatient and outpatient mental health services, physician office visits, consultant visits, ambulance, emergency care and prescription drugs.

It covers preventive care services at no cost when you use In-Network providers. This includes routine physicals and examinations, screenings, GYN examinations and most immunizations.

It pays for a percentage of your medical fees when you use In-Network providers. This is the advantage to using in-network providers. When you use Out-of-Network providers the coinsurance is less which means your potential out-of-pocket costs are more. You will also be responsible for paying any deductibles and applicable office visit and prescription drug copayments.

Note: in some cases, prescription drugs may have a supply or quantity limit or require your doctor to get a Prior Authorization before you can pick-up your prescription.

How can I get more information about my plan?

Click on “My Benefits and Plan Information” to review plan materials.



How much does my student health insurance cost?

The premiums for SHP will be billed to your SIS student account monthly for PhD Students and Postdoc Fellows, and by semester for all others.

- Summer 1 Students, SHP Coverage 5/15/2022-8/31/2023

SHP Coverage	Summer 2022	Fall Semester	Spring Semester	Summer 2023*	Total	Monthly*
	5/15/22-8/31/22	9/1/22-1/14/23	1/15/23-5/31/23	6/1/23-8/31/23		
Student only	\$1,300.50	\$1,701.00	\$1,701.00	\$1,134.00	\$5,836.50	\$378.00
Student + 1	\$3,229.00	\$4,221.00	\$4,221.00	\$2,814.00	\$14,485.00	\$938.00
Student + 2 or more	\$4,331.00	\$5,661.00	\$5,661.00	\$3,774.00	\$19,427.00	\$1,258.00

- Summer 2 Students, SHP Coverage 6/1/2022-8/31/2023

SHP Coverage	Summer 2022	Fall Semester	Spring Semester	Summer 2023*	Total	Monthly*
	6/1/22-8/31/22	9/1/22-1/14/23	1/15/23-5/31/23	6/1/23-8/31/23		
Student only	\$1,119.00	\$1,701.00	\$1,701.00	\$1,134.00	\$5,655.00	\$378.00
Student + 1	\$2,778.00	\$4,221.00	\$4,221.00	\$2,814.00	\$14,034.00	\$938.00
Student + 2 or more	\$3,726.00	\$5,661.00	\$5,661.00	\$3,774.00	\$18,822.00	\$1,258.00

- New Students, SHP Coverage 8/15/2022-8/31/2023

SHP Coverage	Fall Semester	Spring Semester	Summer 2023*	Total	Monthly*
	8/15/22-1/14/23	1/15/23-5/31/23	6/1/23-8/31/23		
Student only	\$1,890.00	\$1,701.00	\$1,134.00	\$4,725.00	\$378.00
Student + 1	\$4,690.00	\$4,221.00	\$2,814.00	\$11,725.00	\$938.00
Student + 2 or more	\$6,290.00	\$5,661.00	\$3,774.00	\$15,725.00	\$1,258.00

- Returning Students, SHP Coverage 9/1/2022-8/31/2023

SHP Coverage	Fall Semester	Spring Semester	Summer 2023*	Total	Monthly*
	9/1/22-1/14/23	1/15/23-5/31/23	6/1/23-8/31/23		
Student only	\$1,701.00	\$1,701.00	\$1,134.00	\$4,536.00	\$378.00
Student + 1	\$4,221.00	\$4,221.00	\$2,814.00	\$11,256.00	\$938.00
Student + 2 or more	\$5,661.00	\$5,661.00	\$3,774.00	\$15,096.00	\$1,258.00

- Spring Students, SHP Coverage 1/15/2023-8/31/2023

SHP Coverage	Spring Semester	Summer 2023*	Total	Monthly*
	1/15/23-5/31/23	6/1/23-8/31/23		
Student only	\$1,701.00	\$1,134.00	\$2,835.00	\$378.00
Student + 1	\$4,221.00	\$2,814.00	\$7,035.00	\$938.00

Student + 2 or more	\$5,661.00	\$3,774.00	\$9,435.00	\$1,258.00
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**Rates subject to change July 1, 2023*

How do I find a Participating SHP Provider?

To locate a provider who participates in SHP, go to <https://www.ehp.org>. You can search by a specific provider's name or enter your zip code to find providers in your neighborhood.

COBRA COVERAGE

Students and their dependents enrolled in SHP that graduate or otherwise leave SHP coverage have the option to enroll in COBRA coverage within 60 days of their last coverage date, for up to 18 months of coverage. Students interested in enrolling in COBRA coverage should contact Student Affairs at 410-955-7545 or SON-StudentAffairs@jhu.edu to complete the necessary paperwork.

COBRA coverage is billed monthly to your student account:

COBRA SHP Coverage	Monthly*
Student only	\$388.00
Student + 1	\$960.00
Student + 2 or more	\$1,280.00

You can request to end SHP COBRA coverage at the end of the current or a future month. Complete and submit an Enrollment Status Change Request found under the Forms and Applications link.

How do I obtain an ID card for SHP?

SHP will mail the insurance ID card to your mailing address on file. To receive a replacement ID card, you can contact SHP's customer service at 410-424-4450 or 1-800-261-2393; or request one online, through your HealthLINK account. Please allow 7-10 business days for your ID card to arrive. Once logged in, you will have access to ID cards, Claim information, EOBs and other plan-related information.

WAIVING THE SHP COVERAGE

Am I eligible to waive?

To be eligible to waive SHP, you must be currently enrolled in a health insurance plan that meets your school's waiver requirements. If your waiver is approved, your SHP coverage will be voided and you will be credited for any previously-billed SHP charges. Waiver requirements include alternate coverage that is:

- An Affordable Care Act (ACA)-compliant policy

- A comprehensive Major Medical Individual policy
- A health insurance plan that is NOT limited to emergency-only care and allows you to visit U.S. doctors, hospitals, laboratories and other health care providers with coverage in Maryland for those studying in Maryland. Virginia Medicaid and Washington DC Medicaid are considered as providing coverage in Maryland.

When Can I Request to Waive My SHP?

- Summer 1 and Summer 2 students can request a waiver through June 30, 2022.
- New and returning students can request a waiver from July 1, 2022 to September 30, 2022.
- Spring students can request a waiver from December 1, 2022 to February 10, 2023.

What should I know before waiving?

Before waiving coverage, review your current policy and then consider these questions:

- Is your plan fully-compliant with the ACA? This means services should include, but aren't limited to:
 - Preventive and non-urgent care (this includes most immunizations)
 - Prescription drugs
 - Emergency care
 - Mental health and substance abuse treatment
 - Surgical care
 - Inpatient and outpatient hospitalization
 - Lab work
 - Diagnostic x-rays
 - Physical therapy and Chiropractic Care
 - Immediate coverage for pre-existing conditions
 - No annual maximum benefits, or allocated dollar limits on these minimum essential benefits
- If you plan to travel elsewhere during the course of the year, does your coverage also extend to these areas?
- Is the annual cost of SHP less expensive than the deductible of your private plan? The cost of being added as a dependent to your parents' plan? Be sure to compare deductibles and total out-of-pocket costs, not just the annual premium.
- Does your current plan call for administrative pre-requirements, pre-certification, or primary-care physician referrals? Keep in mind that physician referrals may delay your access to treatment.

If you don't complete a waiver form by the published deadline, your SHP enrollment will continue and you will be billed for your SHP coverage.

For more information about the ACA, visit: hhs.gov/healthcare/about-the-aca/index.html and [What is the Affordable Care Act? | HHS.gov](#)

What is comparable coverage?

Comparable coverage means your health insurance plan needs to meet your school's waiver requirements, which may include being fully-compliant with all provisions of the Affordable Care Act (ACA). See "What should I know before Waiving?"

Non-comparable health plans include:

- Those that only provide emergency services
- International plans (includes plans not filed in the US, off shore subsidiaries of US carriers)
- Travel insurance plans
- Health care sharing plans (includes Christian Ministries & Liberty Health Share)
- Out-of-state Medicaid plans
- Out-of-State HMOs or EPOs
- Plans from insurance companies not located within the United States
- Prescription discount plans

How do I waive health insurance coverage?

1. Click on the Request a Waiver for Health Insurance button or the Health Insurance Waiver Form link on the left-hand menu.
2. Your waiver form will be populated with your demographic information.
3. Follow the instructions to complete the form.
4. Save a copy of your reference number. This number only confirms submission, not approval of your form.

Will you audit or verify my waiver request?

Yes, we will audit or verify your waiver request. Here's how our waiver review process works:

- We check the insurance company information you entered on your form to make sure it's accurate and that your coverage is active.
- We verify most waiver requests within 1-2 business days.

- Once we verify your coverage, we will email you to let you know if your waiver request was approved or denied. If we deny your request, we will tell you why. We will also guide you should you wish to revise and resubmit your form and supporting documentation.

My waiver was approved last year and my insurance is unchanged – do I need to enter it again?

You must request a waiver each academic year. But you don't have to re-enter the information from last year.

1. Click on the Request a Waiver for Health Insurance button or the Health Insurance Waiver Form link on the left-hand menu.
2. Follow the instructions and click on the button that asks if you want to update the form with last year's insurance information in order to auto-fill the waiver form.
3. Review your answers and submit the form.

Can I edit my form after I've submitted it?

Yes, if it's before your waiver/enrollment deadline date.

1. Click "View My Submitted Forms".
2. Select the form you want to edit.
3. Update the form as needed.
4. Click "Submit Edit."

Can I rescind my form after I've submitted it?

Yes, only if it's before your waiver/enrollment deadline date.

1. Click "View My Submitted Forms".
2. Select the form you want to rescind.
3. Scroll all the way to the bottom of the form
4. Click "Rescind."

If I waive, but then lose my coverage, can I enroll in SHP?

If you waive SHP and then lose coverage under that plan (called a qualifying event), you may submit an Enrollment Status Change Request found under the Forms and Applications link. Qualifying events include:

- Reaching the age limit of another health insurance plan
- Loss of health insurance through divorce
- Involuntary loss of coverage from another health insurance plan

DELTA DENTAL

Am I eligible to enroll in Delta Dental?

All students who are eligible for the Student Benefits Health Program are also eligible to enroll themselves and their eligible dependents in the dental plan. Funded PhD students are automatically enrolled.

How do I enroll in Delta Dental?

If you and any dependents were enrolled in your 2021-22 academic year dental plan, your enrollment will continue for the 2022-23 academic year automatically.

During the open enrollment period, you may click on the green button “Enroll Yourself and Any Dependents in the Dental Plan” or click the “Dental Enrollment Form” link on the left toolbar under “Student Access”.

1. On the enrollment form, select from the drop down menu who you want to enroll:
 - Subscriber / Subscriber + 1 Dependent / Subscriber + 2 or more Dependents
 - Enter demographic information for dependent(s), if selected
2. Confirm your selection

What is the cost to enroll in Delta Dental?

The premium for Delta Dental will be billed to your SIS student account.

Dental Coverage	Annual Coverage 8/15/2022-8/14/2023	Spring Coverage 1/15/2023-8/14/2023
Student only	\$244.13	\$142.41
Student + 1	\$462.48	\$269.78
Student + 2 or more	\$703.07	\$410.12

Please note: The premium for Funded PhD students is paid by their program. However, there is a cost to add dependent coverage.

When Can I Enroll?

- Summer 1, Summer 2, students can enroll in Delta Dental through September 30, 2022.
- New and returning students can enroll in Delta Dental from July 1, 2022 to September 30, 2022.
- Spring students can enroll in Delta Dental from December 1, 2022 to February 10, 2023.

How do I obtain an ID card for Delta Dental?

Delta Dental will mail you an ID card upon enrollment, but you don’t need a Delta Dental ID card when you visit a Delta dentist. Just provide your name, birth date and enrollee ID. You can get a paper or electronic ID

card by creating an account at www.deltadentalins.com. When registering on the Delta Dental website, enter your student ID in the field that asks for your enrollee ID if you do not know your enrollee ID or go mobile by getting Delta’s app and download your ID card. Go to the App Store or Google Play, search for Delta Dental, and download “Delta Dental by Delta Dental Plans Association”.

How do I find a Participating Provider?

To locate a provider who participates in the Delta Dental PPO network, go to www.deltadentalins.com. You can search by a specific provider’s name or enter your zip code to find providers in your neighborhood.

Where can I find more information about Delta Dental?

Click on “Other Insurance Products” to review plan materials.

EYEMED VISION

How do I enroll?

If you and any dependents were enrolled in your 2021-22 academic year EyeMed Vision plan, your enrollment will continue for the 2022-23 academic year automatically.

During the open enrollment period, you may click on the green button “Enroll Yourself and Any Dependents in the Vision Plan” or click the “Vision Enrollment Form” link on the left toolbar under “Student Access”.

1. On the enrollment form, select from the drop down menu who you want to enroll:
 - Subscriber / Subscriber + 1 Dependent / Subscriber + 2 or more Dependents
 - Enter demographic information for dependent(s), if selected
2. Confirm your selection

What is the cost to enroll in EyeMed?

The premium for EyeMed Vision will be billed to your SIS student account.

Vision Coverage	Annual Coverage 8/15/2022-8/14/2023	Spring Coverage 1/15/2023-8/14/2023
Student only	\$59.00	\$59.00
Student + 1	\$59.00	\$59.00
Student + 2 or more	\$59.00	\$59.00

Please note: The premium for Funded PhD students is paid by their program. There is no additional cost to add dependent coverage.

When Can I Enroll?

- Summer 1, Summer 2, students can enroll in EyeMed Vision through September 30, 2022.
- New and returning students can enroll in EyeMed Vision from July 1, 2022 to September 30, 2022.
- Spring students can enroll in EyeMed Vision from December 1, 2022 to February 10, 2023.

How do I obtain an ID card for EyeMed Vision?

EyeMed will mail you an ID card upon enrollment, but you're not required to have an ID card in order to receive services at a participating provider. Just provide your name and birth date when scheduling an appointment. You can print a card by creating an account at eyemed.com or downloading the EyeMed Members App (**A**pp store or **G**oogle Play) to view a digital version. You can register using your student ID.

How do I find a Participating Provider?

To locate a provider who participates in the EyeMed network, go to <https://eyemed.com/en-us>

Where can I find more information about EyeMed Vision?

Click on "Other Insurance Products" to review plan materials.

GENERAL ACCOUNT INFORMATION

How do I change my address?

Please update your address in SIS. The updated address will be sent to the benefit providers automatically.