

Coverage comparable to the Tufts University Student Health Insurance Plan means: (helpful checklist provided at the end of this document)

For all students: The guidelines for Comparable Coverage have been revised as of January 2014 to provide greater clarity of the requirements necessary to waive insurance. The guidelines also include a few new rules. Please read all the information on this page carefully.

In compliance with Massachusetts state regulation [956 CMR 8.00 Section 8.05 under State Law Chapter 15A, Section 18](#), all students registered at least full time/50% of a full-time course load and all students certified as full-time are required to be enrolled in the Tufts University Student Medical Insurance Plan unless the student is enrolled in a comparable health insurance plan and files a Medical Insurance Waiver by the Waiver deadline. (This is an annual requirement).

Remember, you should not waive coverage if your current plan does not meet [ACA](#) minimum essential coverage requirements. If your current plan doesn't meet these requirements and you waive coverage, you may pay federal tax penalty. Find out more about minimum essential coverage on the [IRS website](#).

**F2 and J2 visa-holders who are also enrolled part-time for classes at Tufts University are required to have health insurance, and are subject to the same comparable coverage guidelines described below.*

1. The medical insurance plan must be provided by a **U.S.-based carrier company or U.S.-based subsidiary**. Foreign insurance plans (including foreign-based Embassy-sponsored plans except as noted above) are NOT acceptable. Neither a U.S.-based Third Party Administrator (TPA), nor a U.S. Satellite office of foreign company meets this requirement. The insurance carrier, itself, must be U.S.-based (unless the student is studying outside the United States).
2. The plan must provide reasonably comprehensive coverage of health services, including preventive and primary care, emergency services, surgical services hospitalization benefits, ambulatory patient services, and mental health services; and be reasonably accessible to the student in the area where the student attends school. Plans not meeting this requirement are not acceptable.
 - I understand that a health insurance plan provides coverage through a closed network of providers, not reasonably accessible to me in the area where I attend school, for all but emergency services does not qualify for a waiver.
 - Examples of closed networks include students enrolled in MassHealth Limited or the Children's Medical Security Program or the Health Safety Net, Kaiser Permanente Insurance and out of state Medicaid programs.
3. **Any plan may not impose an annual or lifetime limit on the dollar amount of required essential health benefit for any covered individual.**

4. Mental health and substance abuse must be covered as any other illness or injury within the local Boston area or the area in which the student is studying (this means that both inpatient and outpatient treatment must be covered).
5. There must be no limitations for the coverage of pre-existing medical conditions.
6. Prescription drug coverage must be as high as the plan maximum – as per [ACA](#) health reform mandates.
7. If you will be studying outside your home country, emergency medical evacuation-repatriation coverage must be included.
 - Travel Insurance Policies for use outside the United States may not be used in lieu of a comprehensive medical insurance plan, but may be purchased to supplement the primary insurance plan. The combination of a primary insurance plan and a travel insurance plan must supply the student with all the requirements listed above and be fully accessible for all these services where the student is studying.
 - Students studying outside the United States who supplement their coverage with a travel insurance plan must have an active comprehensive health insurance plan that covers the student in the home country (to protect the student in the event the student is med-evacuated to the home country).
8. International and Exchange students enrolled in an employer-based plan that provides comprehensive U.S. based coverage as described are eligible to waive. Neither foreign-based plans, nor a travel insurance plan combined with any foreign insurance policy are allowable. A Domestic Employer-based plan may be supplemented by a Travel Plan to provide the necessary Medical Evacuation coverage.
9. Embassy-sponsored students for whom their embassy provides comprehensive U.S. based coverage as described are eligible to waive, as indicated above.
 - The University currently limits embassy-sponsored plans as deemed comparable to SHIP to those which provide fully comprehensive and accessible domestic coverage.
 - An embassy-sponsored plan that requires the student to pay up-front for ambulatory or hospital services, and then seek reimbursement will not be accepted. An embassy-sponsored plan that does not provide comprehensive coverage including chronic disease management, prescription drug coverage, mental health services, and substance abuse will also not be accepted.
10. The issuing insurance carrier must be a U.S. Based carrier. Foreign-based coverage is not allowable for any student, foreign or domestic, who is studying in the United States.

What makes an insurance carrier a U.S.-based carrier?

 - A U.S.-based carrier means that the insurance carrier issuing the plan is a U.S. or domestic company, regardless of where the policy is purchased or where the claims are processed. Carriers outside of the U.S. means foreign or foreign-based insurance companies (i.e., non-domestic or non-U.S. companies), including those companies with satellite offices in the United States.
 - *Foreign Insurance Companies with U.S. Subsidiaries:*
Some foreign insurance companies have numerous companies and subsidiaries

worldwide. A foreign carrier may have a U.S. subsidiary, as well as subsidiaries in other countries. Policies purchased from the U.S. subsidiary qualify for a waiver, but policies purchased from foreign subsidiaries do not qualify for a waiver (unless the student is studying outside the United States).

- *Foreign Insurance Companies with U.S. Satellite Offices:*
Insurance carriers that are based in a foreign country, but have a U.S. satellite office are considered foreign or foreign-based insurance companies. Their health plans are ineligible for a waiver (unless the student is studying outside the United States).

Students should compare the benefits, limitations, and exclusions of their alternate health insurance plan with those provided by the Tufts University Student Health Insurance plan before filing their Medical Insurance Waiver.

We understand that the details above are extensive. If you do not know whether your coverage meets the conditions above, contact your health insurance plan administrator to get current, accurate information about your plan before completing the medical insurance waiver. If you have additional questions, the Tufts Health Service business office can assist you at 617-627-5176 or email studenthealthinsurance@tufts.edu.

If Tufts finds that you have waived with a policy that is not comparable, or that your insurance policy has expired, we will contact you to let you know that you will be billed for the student insurance plan.

Comparable Coverage Checklist

APPLICABLE TO ALL STUDENTS:	
<input type="checkbox"/>	Is your policy underwritten and/or administered by a United States based company or an embassy sponsored plan?
<input type="checkbox"/>	Does your plan provide an unlimited maximum benefits for covered medical expenses?
<input type="checkbox"/>	Does your plan cover preventive; primary care; and ambulatory patient services in the area you will reside during the academic period?
<input type="checkbox"/>	Does your plan cover emergency care benefits in the area you will reside during the academic period?
<input type="checkbox"/>	Does your plan cover inpatient hospitalization for medical <u>services</u> in the area you will reside during the academic period?
<input type="checkbox"/>	Does your plan cover inpatient <u>and</u> outpatient (non-elective) surgical services in the area you will reside during the academic period?
<input type="checkbox"/>	Does your plan cover inpatient and outpatient mental health care benefits in the area you will reside during the academic period?
<input type="checkbox"/>	Does your plan cover labwork, diagnostic X-rays, physical therapy, chiropractic care in the area you will reside during the academic period?
<input type="checkbox"/>	Does your plan cover maternity, newborn care, and pediatric services within the area you will reside as mandated by the Affordable Care Act?
<input type="checkbox"/>	Do you certify that your plan does not impose an annual or lifetime limit on the dollar amount?
<input type="checkbox"/>	Does your plan provide coverage for any pre-existing conditions with no waiting period?
<input type="checkbox"/>	Does your plan provide coverage for prescriptions up to the plan maximum?
<input type="checkbox"/>	Does your plan cover in-network and out-of-network providers within 50 miles for emergency and non-emergency services in the area you will reside?
APPLICABLE ONLY TO INTERNATIONAL STUDENTS:	
<input type="checkbox"/>	Does your plan provide repatriation of remains?
<input type="checkbox"/>	Does your plan provide medical evacuation?

*Required services (as listed in the above checklist) must be provided at a location within a reasonable distance of the greater Boston area. Health plans with a closed network of providers and accessible for only emergency services, such as out-of-area HMOs, EPOs, or Medicaid products, generally not acceptable. These are some of the plans that are not considered comparable:

- HMO and EPO out-of-state plans
- MassHealth Limited
- Neighborhood Health Plans
- Kaiser Permanente Insurance
- Out of MA State Medicaid (e.g., Husky Health, Wellsense)
- Children’s Medical Security Program
- Health Safety Net
- SHARP Health Plan
- Emblem Health
- Regional Plans such as plans from Puerto Rico (e.g., Triple-S and MCS) and Hawaii