

HEALTH INSURANCE

ON-CAMPUS SUPPORT

STUDENT MEDICAL PLAN

Provides efficient, affordable, and effective medical coverage for students. If you have any questions about the student medical plan, contact 216.368.3049 or <u>medicalplan@case.edu</u>. View <u>plan details and coverage here</u>.

STUDENT MENTAL HEALTH FUND

The Student Mental Health Fund is available to assist CWRU students in obtaining necessary mental health care. Type of expenses covered by the Mental Health Fund include but are not limited to psychiatric hospitalization, intensive treatment programs (IOP, PHP),



counseling/therapy sessions, medications, transportation costs to appointments/treatment, costs for recommended psychological testing and assessment, and insurance co-pays and deductibles. To submit an application, log into <u>myhealthconnect.case.edu</u> and select "Send or Read a Secure Message," click "New Message," and click "I want to submit an application for the Student Mental Health Fund."

STUDENT HEALTH EMERGENCY FUND

The Student Health Emergency Fund exists to assist CWRU students and postdocs who are facing financial hardship due to unforeseen health-related financial emergency or event. Types of expenses include costs related to emergency medical or mental health care, necessary and critical medical or mental health care not covered by insurance, emergency medical treatment/medication when the student has no ability to pay and the costs cannot be covered by insurance, and urgent travel costs for a medical, mental health, or social service reason. To submit an application, log into <u>myhealthconnect.case.edu</u> and select "Send or Read a Secure Message," click "New Message," and click "I want to submit an application for the Student Health Emergency Fund."



OFF-CAMPUS SUPPORT

CUYAHOGA HEALTH ACCESS PARNTERSHIP

The Cuyahoga Health Access Partnership connects patients without insurance to providers who offer discounted primary care and specialty care. Their Navigators are certified and licensed to help answer your questions about health insurance and benefits while also providing community resource information. Fill out the <u>Medworks Navigation</u> <u>Contact Form</u> and a team member will contact you within 24 hours.

MEDREFER

MedRefer helps people access free or low-cost prescription medication through drug companies, generic mail order pharmacies, retail pharmacy programs, discount cards and/or copay foundations for people with particular illnesses. Call 2-1-1 to get connected.







GOVERNMENT ASSISTANCE PROGRAMS

MEDICAID

Medicaid is health insurance paid for by the government. Most clients will have to choose and enroll in a Managed Care Plan (MCP).

The following individuals may qualify for Medicaid coverage in Ohio:

- Individuals with low-income
- Pregnant women, infants, and children
- Older adults
- Individuals with disabilities

To be eligible for coverage, you must:

- Be a United States citizen or meet <u>Medicaid non-citizen</u> requirements
- Have or get a Social Security number
- Be an Ohio resident
- Meet financial requirements. Even if you are not sure that you and your family will qualify for coverage, you should still apply.

Non-U.S. citizens may be eligible for <u>Alien Emergency Medical Assistance</u> or <u>Refugee</u> <u>Medical Assistance</u>.



If no one can claim you as a dependent and you're living on your own, you would qualify for Medicaid as an individual. If you are claimed as a dependent or live with your parents, then you would have to qualify for Medicaid with your family's income included.

Family Size	Parents/Caretaker	Adults	Children	Pregnant	Children
	Relatives	(age 19-64)	with	Women	without
			Insurance		Insurance
1	\$1,130	\$1,670	\$1,958	\$2,510	\$2,586
2	\$1,533	\$2,266	\$2,658	\$3,407	\$3,509
3	\$1,937	\$2,862	\$3,357	\$4,304	\$4,433
4	\$2,340	\$3,458	\$4,056	\$5,200	\$5,356
5	\$2,744	\$4,055	\$4,756	\$6,097	\$6,280
6	\$3,147	\$4,651	\$5,455	\$6,994	\$7,204
7	\$3,551	\$5,247	\$6,155	\$7,890	\$8,127

Paper Applications: You can visit the Jane Edna Hunter building (3955 Euclid Ave Cleveland OH 44115) to pick up benefits applications and deposit them in the safe and secure drop-box.

Phone Applications: Call 844.640.6446 Monday to Friday 8am to 4pm. Virtual hold is available for all programs and will hold your place in line and call you back when it's your turn to speak to a worker. Mondays are higher volume days and lunch hours on any day of the week tend to be the busiest times.

Web Portal Applications: <u>benefits.ohio.gov</u>. Click Apply Now option.





The Greater Cleveland Food Bank Client Help Specialists can assist with over-the-phone applications for Medicaid. Calls are free and confidential. Call 216.738.2067 to receive support.

Return verification documents to them with your name and case number or social security number on all documents. This can be uploaded online through the Ohio Benefits Self-Services Portal or through email at <u>CJFSDocs@jfs.ohio.gov</u> (please include your full name and case number in the email).

Criteria of Eligibility	How can it be verified?	
Proof of Income	Paystubs, employer statement, award letters,	
	w2s, 1099s, etc. or electronic verification from	
	IRS or other electronic sources.	
Resources	Bank Statements, stocks, bonds, etc.	
Proof of Citizenship or Alien Status	Birth certificate, US Passport, Certification of	
	Naturalization, or electronic verification from	
	Social Security Administration. Immigration	
	documents.	
Pregnancy – if applicable	Medical provider written statement	
Disability status – if applicable	Doctor statement, SSA determination	
	documentation	

After you apply, you may get a letter asking for more information. If your application for Medicaid is approved, you are automatically enrolled in either Fee-For-Service coverage or Managed Care. Most people will be enrolled in managed care. Shortly after you are approved for Medicaid, you will get a letter asking you to pick a plan. You can choose between Buckeye Health Plan, CareSource, Molina Healthcare, Paramount Advantage, and UnitedHealthcare Community Plan. Individuals who do not choose a managed care plan will be automatically enrolled in one to receive coverage.

Individuals covered by Medicaid should be aware that they will have to complete a renewal every 12 months to have their eligibility redetermined. Individuals that experience a change affecting their eligibility within that 12-month period must notify their case worker within ten days of the change.

OHIO HEALTHY START

Ohio Healthy Start (federally known as Children's Health Insurance Program, CHIP) provides free or low-cost health insurance for families with children. This program is designed to provide increased access to health coverage for children in families with income too high to qualify for Medicaid but too low to afford private coverage. To be eligible for this benefit program, you must be a resident of Ohio and meet all of the following:

- Either 18 years of age and under or a primary care giver with a child(ren) 18 years of age and under
- A U.S. Citizen, National, or a Non-Citizen legally admitted into the U.S.
- Uninsured (and ineligible for Medicaid).



Household Size	Maximum Income Level (Per Year)
1	\$30,120
2	\$40,880
3	\$51,640
4	\$62,400
5	\$73,160
6	\$83,920
7	\$94,680

When applying for Healthy Start, proof of income, pregnancy, citizenship, and other health insurance is required. You can apply for Healthy Start at <u>benefits.ohio.gov</u> or by calling 1.800.324.8680.

