

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 medicalplan@case.edu. View plan details and coverage here.



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 myhealthconnect.case.edu 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 but are not limited to 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 myhealthconnect.case.edu 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

MEDWORKS

Medworks plays an integral role in linking people who are uninsured or underinsured with healthcare. Medworks helps you understand insurance options and benefits, enroll in health insurance, find high-quality/low-cost health care, schedule medical appointments, access community resources, and more. Contact Medworks by calling 216.231.5350 ext. 205 or via email at navteam@medworksusa.org.

GOVERNMENT ASSISTANCE PROGRAMS

MEDICAID

Medicaid is a public health care program funded by the state and federal government. It provides health care coverage to certain individuals with limited income. In Ohio, a person is eligible for Medicaid health care coverage for free or at a low cost if they meet specific



income and eligibility requirements. Cover includes doctor visits, hospital care, prescriptions, vision, dental, mental health services, and more.

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.





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	1,174	1,735	2,035	2,609	2,687
2	1,587	2,345	2,750	3,525	3,631
3	1,999	2,954	3,465	4,442	4,575
4	2,412	3,564	4,180	5,359	5,520
5	2,824	4,173	4,895	6,275	6,464
6	3,237	4,783	5,610	7,192	7,408
7	3,649	5,393	6,325	8,109	8,352

Web Portal Applications: benefits.ohio.gov. 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.

Criteria of Eligibility	How can it be verified?		
Proof of Income	Paystubs, tax returns, W-2 forms, employer		
	statements, benefit award letters, pension		
	statements, alimony or child support checks,		
	dividend checks		
Resources	Such as proof of cash, savings, checking, real		



	property, stocks, bonds.	
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	
Other Insurance - if applicable	Medical insurance card	

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. You will get a letter with your Medicaid ID or your managed care ID card and can start using services right away. In Ohio, most individuals who have Medicaid must join a managed care plan to receive their health care. Shortly after you are approved for Medicaid, you will get a letter asking you to pick a plan. Individuals covered by Medicaid should be aware that they will have to complete a renewal every 12 months to have their eligibility redetermined. More details regarding the steps to apply for Medicaid can be found here.



CHIP PROGRAM

The CHIP program is available to uninsured children (up to age 19) in families that earn too much money to qualify for Medicaid.



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