

MIT student health plan

07
08

overview



Welcome to MIT and MIT Medical. Use this publication to learn more about your health insurance options and coverage while you are at school.

MIT Medical is your centralized source for health care.

Our on-campus team of more than 100 clinicians provides high-quality medical and mental health care 24 hours a day. To learn more about MIT Medical, visit <http://web.mit.edu/medical>.



MIT Health Plan

* Health Insurance Requirements

Massachusetts law requires that students have comprehensive health insurance. Many students have health insurance through their families.

Does your insurance meet the Massachusetts requirements? If you have coverage through a closed-network HMO outside New England or insurance provided by a carrier outside the United States, your insurance may not meet the state requirements. For more information about the requirements of the Massachusetts Qualified Student Health Insurance Plan (QSHIP), visit <http://web.mit.edu/medical/waive>.

Recent revisions to QSHIP regulations include a requirement that all students purchase a comprehensive health insurance policy from an insurance carrier based in the United States. The regulations do include an

exception for students who are studying in a foreign country to subscribe to a plan that will cover them in the country where they will study and live.

Other types of coverage may qualify, but it may be difficult to use that coverage while away at school. Through its Student Health Plan, MIT makes insurance available to meet the health care needs of students and their dependents. You must carefully consider your options with regard to health insurance. The next few pages will give you more information about coverage available through MIT, the costs, and your next steps.

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the MIT student health plan

The MIT Student Health Plan is available to all registered MIT students and partners and dependents. It consists of two complementary parts, the **MIT Student Medical Plan** and the **MIT Student Extended Insurance Plan**.

The **MIT Student Medical Plan** (cost for students covered by tuition) covers a wide range of services provided at MIT Medical, including office visits for primary care, many medical specialties, 24-hour urgent care, mental health care, and other services. Registered MIT students are automatically enrolled in the MIT Student Medical Plan. Most services provided at MIT Medical are free.

The **MIT Student Extended Insurance Plan** (optional for an additional fee) is designed to complement the MIT Student Medical Plan and meet the state requirements for comprehensive health insurance. It covers inpatient hospitalization, including the birth of a child, inpatient mental health and substance abuse treatment, surgical procedures, and prescription drugs. The MIT Student Extended Insurance Plan is a preferred provider organization (PPO) plan that uses the Blue Cross Blue Shield Preferred Provider network. You will receive, and must use, a Blue Cross Blue Shield member card. As with any PPO, your benefits will

usually be better when you use an in-network facility or provider. Deductibles, coinsurance, and copayments may apply when using both in- and out-of-network providers. If you choose an “out-of-network” facility or provider, you will pay a higher percentage of the cost.

Almost 70 percent of MIT students, including many with family coverage that meets Massachusetts requirements, choose the insurance available through the MIT Student Extended Insurance Plan. All MIT students and special students taking more than 27 units are automatically enrolled in the MIT Student Extended Insurance Plan and are billed for the cost. The MIT Health Plans will cancel coverage and remove any charges for students who show proof of comparable insurance and complete a waiver form by the deadline at the beginning of each semester. Before requesting a waiver for the Extended Plan, carefully compare benefits and find out how your current insurance works away from home. In addition to meeting the requirements of Massachusetts law, your insurance plan must meet your health care needs in the Boston area.

> rates 07 - 08

| MIT STUDENT EXTENDED INSURANCE PLAN RATES | both terms september 1, 2007- august 31, 2008 | fall term only september 1, 2007- january 31, 2008 | spring term only february 1, 2008- august 31, 2008 |
|---|---|--|--|
| student (automatic enrollment) | \$1,440 | \$600 | \$840 |
| student and partner | \$2,250 | \$937 | \$1,313 |
| student and dependent(s) | \$1,550 | \$646 | \$904 |
| family (student, partner, and dependents) | \$2,360 | \$983 | \$1,377 |

| MIT STUDENT MEDICAL PLAN RATES | | | |
|---------------------------------|-------------------|-------------------|-------------------|
| student (automatic enrollment) | FREE with tuition | FREE with tuition | FREE with tuition |
| partner | \$940 | \$392 | \$548 |
| dependent(s) | \$475 | \$198 | \$277 |
| family (partner and dependents) | \$1,415 | \$590 | \$825 |

The MIT Student Medical Plan is free to students with tuition. If enrolling your partner and dependents in the MIT Student Medical Plan, premiums will be billed to your student account.

You will be billed for the MIT Student Extended Insurance Plan on your student account. For information about payment options, see http://web.mit.edu/sfs/bills/payment_methods.html.

how to enroll or waive MIT student health plan coverage

Students

To enroll in the MIT Student Extended Insurance Plan, do nothing. Regular, registered MIT students, special students taking more than 27 units, and all students on J1 or F1 visas are automatically enrolled in the MIT Student Extended Insurance Plan and billed for the cost.

To waive MIT Student Extended Insurance Plan coverage, you must submit a waiver form each academic year. The online waiver request form is available at <http://web.mit.edu/medical/waive>. By submitting the online waiver form, you certify that you already have health insurance that meets Massachusetts minimum standards (explained on the website) and that you will pay any medical bills that result from services not covered under your health insurance. QSHIP regulations no longer allow students to waive the MIT Student Extended Insurance Plan with insurance policies that have an international carrier based outside of the United States. Massachusetts will soon require colleges and universities to obtain a photo copy of your insurance card before your waiver request can be approved. If requested, please drop off a copy of your insurance card to the Health Plan office in E23-308. Your waiver may not be processed until the copy is reviewed.

To avoid paying for the MIT Student Extended Insurance Plan, you must submit a waiver form by September 30 for the fall term or February 28 for the spring term.

Partner and Dependents

You may also enroll your partner and dependents (see page 6 for definitions) in the MIT Student Medical Plan and the MIT Student Extended Insurance Plan.

The MIT Student Medical Plan. To enroll your partner and dependents, return an MIT Student Enrollment Form. You must submit a new form each academic year, and we must receive your form by September 30 for fall-term coverage or February 28 for spring-term coverage. The minimum enrollment period is one full term. To enroll your partner and dependents in the Student Medical Plan without also enrolling them in the MIT Student Extended Insurance Plan, you must provide evidence that they are already enrolled in another health insurance plan.

Forms and additional information about enrollment are available at <http://web.mit.edu/medical>. Altered forms will not be accepted.

The MIT Student Extended Insurance Plan.

To enroll dependents, return an MIT Student Enrollment Form. You must submit a new form each academic year, and we must receive your form by September 30 for fall-term coverage or February 28 for spring-term coverage. You must purchase the MIT Student Extended Insurance Plan for yourself before you can enroll additional family members. The minimum enrollment period for each family member is three months. Your partner and/or dependents must enroll in the MIT Student Medical Plan in order to enroll in the Student Extended Insurance Plan. Together they provide comprehensive protection for you and your family.

> cost sharing

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN | |
|--|---|--|--|
| | | in-network (See page 6 for definition) | out-of-network (See page 6 for definition) |
| COINSURANCE (% you pay) | None | 10% for diagnostic tests and 20% for other selected outpatient services | 40% for selected outpatient services |
| ANNUAL DEDUCTIBLE for covered services Note: for specific medical service deductibles, see individual benefits on following pages | None | No annual deductible | You pay first \$250 per member per calendar year before Plan payments begin, for all covered services except: ambulance, chemotherapy, chiropractic care, diabetic testing materials, emergency room care, hospice care, inpatient mental health and substance abuse, outpatient psychopharmacology, outpatient mental health, physical therapy, prescription drugs, radiation therapy |
| ANNUAL OUT-OF-POCKET MAXIMUM | None | In any calendar year when your annual deductible and coinsurance total \$1,000 for a subscriber or \$500 for a covered family member, the Plan pays 100% for that person for all future covered services in that calendar year, except services requiring copayments | |
| COPAYMENTS (\$ amount you pay) | None except for certain immunizations listed on page 10 | See prescription drugs, prescription birth control devices, diabetic testing materials, admissions, emergency room visits, urgent care/office visits, chiropractic care, and copay immunizations. Copayments do not count towards an out-of-pocket maximum | |

> commonly used terms

Annual out-of-pocket maximum

The maximum you pay in a calendar year for certain covered services. When the deductible and coinsurance amounts you have paid in a calendar year add up to the out-of-pocket maximum amount, full benefits will be provided based on the allowed charge if the member continues to receive those covered services during the rest of the calendar year. You will continue to be responsible for applicable copayments.

Coinsurance

The percentage of covered charges for which you are liable.

Copayment

The specified dollar amount you pay when receiving certain treatments, services, or supplies.

Deductible

An amount you pay for covered services each plan year before the MIT Student Extended Insurance Plan begins to pay benefits.

Dependent

Unmarried children up to 25 years of age, and children of covered, unmarried dependents.

Enrollment Form

Form that officially enrolls the subscriber or dependents in one or both of the insurance plans. Forms must be submitted each academic year.

In-network

A group of doctors, hospital and other health care providers contracting with a health plan, usually to provide care at special rates and to handle paperwork with the health plan. For the MIT Student Extended Insurance Plan, in-network providers in the United States are part of the Blue Cross Blue Shield PPO network. To find PPO-participating hospitals or providers, see <http://www.bluecares.com/healthtravel/finder.html> and choose the PPO network.

Out-of-network

Health care services received outside the PPO network. For the MIT Student Extended Insurance Plan, an out-of-network provider is any provider not participating with the local Blue Cross Blue Shield PPO network. You will have a greater financial liability when you receive services from an out-of-network provider because providers may balance bill you above the BCBS allowed amount in addition to your deductible and coinsurance. To find BCBS-participating hospitals or providers, see <http://www.bluecares.com/healthtravel/finder.html> and choose the PPO network. Outside the United States, all services provided by licensed medical facilities/providers are considered out-of-network.

Partner

A student's spouse or spousal equivalent.

Preferred Provider Organization (PPO)

An arrangement between a group of doctors or providers and an entity, such as an employer or other group. This arrangement makes it possible for price discounts on services in exchange for a higher volume of patients.

Waiver

Form that officially documents a student's voluntary cancellation of membership in the MIT Student Extended Insurance Plan. Waivers are accepted only for insurance plans that meet Massachusetts requirements and must be submitted each academic year.

> inpatient in hospital

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN | |
|---|---|--|--|
| | | in-network (See page 6 for definition) | out-of-network (See page 6 for definition) |
| Room and board when admitted as medical, surgical, or maternity inpatient, includes semiprivate accommodations, general nursing care, operating room, anesthesia, recovery, diagnostic tests, medication, physician services. Note: "Observation" admissions are not considered to be Inpatient Admissions and are not a covered service unless an emergency | No charge at MIT Medical's Inpatient Service only | Covered in full up to 120 days per calendar year (combined in-network and out-of-network medical/surgical and maternity annual limit) after: you pay \$100 copayment for hospital charges | you pay annual deductible, you then pay 40% coinsurance for covered services |
| Maternity: physician or other covered obstetrical clinician services billed under global physician maternity charge for prenatal services and delivery | Not covered | Global physician maternity charge covered in full | After annual deductible, you pay 40% coinsurance for covered services |
| Maternity: newborn care including circumcision during maternity admission | Not covered | Covered in full | After annual deductible, you pay 40% coinsurance for covered services |

> limitations and exclusions

Both plans cover medically necessary services only.

Certain services are not covered under either plan, including allergy serum, custodial care, most educational testing and evaluation, most neuropsychological and psychological testing, most experimental treatment, hearing aids and hearing aid evaluations, eyeglasses, contact lenses, "over-the-counter" medicines and products, diet drugs, cosmetic surgery, orthotics, podiatry, psychoanalysis, and over-the-counter and prescription vitamins.

All benefits effective September 1, 2007. This is a quick overview. If there's a conflict between this overview and the summary plan description, the summary plan description governs. The summary plan description is available online at <http://web.mit.edu/medical>.

If you have questions, call Claims and Member Services at 617-253-5979, or e-mail mservices@med.mit.edu

> mental health

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN in-network (See page 6 for definition) out-of-network (See page 6 for definition) | |
|--|---|---|--|
| Inpatient mental health includes room, board, medication, doctor and nursing care, therapeutic techniques, in a cooperating mental hospital, a participating general hospital, or a participating alcohol or drug treatment facility for the treatment of mental conditions, alcoholism, or drug rehabilitation | No charge at MIT Medical only, but limited services available | When referred by MIT Medical, you pay \$100 copayment per admission for hospital charges, and then Plan pays in full up to 120 days per calendar year (combined in-network and out-of-network inpatient mental health annual limit). Residential treatment programs are not covered | |
| Outpatient psychotherapy, except psychoanalysis | No charge at MIT Medical only | When referred by MIT Medical, in each calendar year, covered in full for visits 1-12; you pay 20% for visits 13-24. Limited to 1 visit per week (combined in-network and out-of-network outpatient psychotherapy visit limits) | |
| Outpatient psychopharmacology | No charge at MIT Medical only | Covered in full for up to 4 visits per calendar year (combined in-network and out-of-network annual outpatient psychopharmacology visit limits) | |

> urgent and emergency care

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN in-network (See page 6 for definition) out-of-network (See page 6 for definition) | |
|---|---|--|---|
| Emergency care for emergency illness conditions that require immediate treatment at the nearest hospital emergency room (ER), such as suspected heart attack, stroke, or poisoning | No charge at MIT Medical only. However, MIT Medical's Urgent Care Service is not a hospital emergency room | For each covered ER visit, you pay a \$100 copayment for hospital charges. The copayment is waived if you are admitted to the hospital as an inpatient | |
| Urgent outpatient care for conditions that need prompt, but not immediate, attention, such as sprains, earaches, or high fever | No charge at MIT Medical only | Up to 4 covered urgent care/office medically necessary visits per year, combined in-network and out-of-network maximum. In-network services are covered at 80%, after \$25 copayment. You are responsible for the \$25 copayment and 20% coinsurance | After annual deductible, out-of-network services are covered at 60% of the allowed charge. You are responsible for the 40% coinsurance, and any amount above the allowed charge |
| Ambulance services | Not covered | When medically necessary, Plan pays: -up to \$350 per day -up to \$10,000 per illness for air ambulance when arranged in advance by MIT Medical | |

> outpatient

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN | |
|--|---|---|--|
| | | in-network (See page 6 for definition) | out-of-network (See page 6 for definition) |
| Acupuncture for pain management | Not covered | Fully covered for up to 12 visits per calendar year at Mass. General Hospital or New England School of Acupuncture | Not covered |
| Alcohol and substance abuse treatment | No charge at MIT Medical only | Covered under outpatient psychotherapy benefit: see page 8 | |
| Appliances and medical devices | Not covered | \$1500 reimbursement per member per calendar year (combined in-network and out-of-network annual appliances and medical devices limit), when prescribed by MIT Medical clinician for covered services: you pay 20% coinsurance | After annual deductible, you pay 40% coinsurance |
| Birth control devices that require a prescription | Not covered | Covered: see Prescription drugs on page 11 at MIT Pharmacy you pay \$45 per device. Covered services applied to prescription drug limit | Not covered |
| Birth control prescription drugs | Not covered | Covered: see Prescription drugs on page 11 | |
| Chemotherapy or radiation therapy | Not covered | No charge for therapy treatment (Note: office visits subject to annual visit limit) | |
| Chiropractic care | Not covered | You pay \$25 copayment plus 20% coinsurance per visit. Combined in-network and out-of-network benefit limit of \$1,500 per illness | |
| Dental care at MIT Dental or Surgical Daycare Center only (not covered elsewhere): extraction of impacted wisdom teeth when partially or fully embedded in bone, or for 7 or more teeth at one time; certain osseous (gum) surgery; excision of malignant oral lesions; reduction of a jaw fracture | Not covered | Covered in full After annual deductible, you pay 40% coinsurance for covered services | |
| Dental care: Oral surgery consultations for evaluation of wisdom teeth removal or diagnosis of TMJ (temporomandibular joint disorder) | Not covered | -at MIT Dental, no charge. Required x-rays not covered -elsewhere, not covered | Not covered |

> outpatient continued

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN | |
|--|---|---|---|
| | | in-network (See page 6 for definition) | out-of-network (See page 6 for definition) |
| Diabetic testing material | Not covered | Covered: see Prescription drugs, page 11 | |
| Diagnostic lab & x-ray services | Covered in full at MIT Medical only | You pay 10% coinsurance | After annual deductible, you pay 40% coinsurance |
| Eye exams, routine | Not covered but discount on eyeglasses at MIT Optical | Covered in full for one routine eye exam in a 12-month period at MIT Medical only. For all contact lens care, full charges apply | Not covered |
| Flu shots | No charge at MIT Medical only | Not covered in-network or out-of-network | |
| Gynecology exams, routine | No charge at MIT Medical only | Not covered in-network or out-of-network | |
| Gynecology: Pap smear, routine | No charge at MIT Medical only | Non-routine office visit covered subject to annual visit limit. In addition: –at MIT Gyn Service, no charge for test –elsewhere, you pay 10% for one test per calendar year | After annual deductible, you pay 40% coinsurance for one test per calendar year |
| Home health care | Not covered | You pay 20% for specified services | After annual deductible, you pay 40% coinsurance for specified services |
| Hospice care | Not covered | No charge for specified services | |
| Copay immunizations: cholera, hepatitis A, hepatitis B, ISG, Japanese encephalitis, meningococcal, rabies, typhoid, yellow fever | You pay \$20 copay per dose at MIT Medical only Gardasil not covered | Not covered, with the exception of the Gardasil vaccine when administered at MIT Medical only You pay \$20 for each Gardasil injection | Not covered |
| Immunizations such as MMR, DPT, polio, rubella, etc. | At MIT Medical only, no charge except for pre-entry (pre-matriculation) shots | Not covered in-network or out-of-network | |
| Mammography, routine | At MIT Medical only, no charge | Not covered in-network or out-of-network | |
| Office visits with physician, nurse practitioner, or physician assistant | At MIT Medical only, no charge except for outpatient obstetrical visits charged under the global physician maternity charge. See page 7 | Up to 4 covered Urgent care/ Office medically necessary visits per year, combined in-network and out-of-network maximum. In-network services are covered at 80%, after \$25 copayment. You are responsible for the \$25 copayment and 20% coinsurance | After annual deductible, out-of-network services are covered at 60% of the allowed charge. You are responsible for the 40% coinsurance, and any amount above the allowed charge |

> outpatient continued

| | MIT STUDENT MEDICAL PLAN at MIT Medical only | MIT STUDENT EXTENDED INSURANCE PLAN in-network (See page 6 for definition) out-of-network (See page 6 for definition) | |
|---|---|--|---|
| Physical exams, routine | At MIT Medical only, no charge except for “form” or pre-entry (pre-matriculation) physicals | Not covered in-network or out-of-network | |
| Short term rehabilitation therapy Outpatient physical, speech, and/or occupational therapy visits | Not covered | You pay 20% coinsurance for visits 1-16 and you pay 50% for visits 17-24. Benefit limited to 24 visits per calendar year (combined in-network and out-of-network short term rehab visit limits) | |
| Pregnancy, voluntary termination of | Not covered | Covered in full at Planned Parenthood of Boston only | Not covered |
| Prescription drugs | Not covered | For up to a 30-day supply, for up to \$3,500 in combined actual charges for prescription drugs, prescription birth control devices, diabetic testing materials, and copay immunizations per member per calendar year. Combined in-network and out-of-network annual limit: at MIT Medical, you pay \$15 copayment per prescription Copayment applies per prescription, up to a maximum of a 30-day supply. If additional supply is required, you will be charged the appropriate additional copayments | you are reimbursed minus \$15 copayment per prescription |
| Surgery, ambulatory | At MIT Medical only, no charge, but limited services available | No charge for covered services. Office visits that are billed separately from surgery are covered, subject to annual visit limit | After annual deductible, you pay 40% coinsurance for covered services. Office visits that are billed separately from surgery are covered, subject to annual visit limit |

> out of country care

If you plan to be out of the country, contact Claims and Member Services at 617-253-5979 or mservices@med.mit.edu before you go to find out how the MIT Student Extended Insurance Plan works outside of the United States.

| | MIT STUDENT MEDICAL PLAN | MIT STUDENT EXTENDED INSURANCE PLAN OUT-OF-NETWORK: -outside United States, at any licensed medical facility/provider |
|------------------------------------|--------------------------|---|
| Services outside the United States | Not covered | <ol style="list-style-type: none"> 1) Outside the United States all covered services are considered to be Out-of-network 2) Same coverage as within United States. Many facilities require that you pay at time of care and file claim with Massachusetts Blue Cross Blue Shield 3) Members must contact BCBS worldwide network (1-800-810-2583) for inpatient admissions. You may also find more information at http://www.bcbs.com/coverage/bluecard/bluecard-worldwide.html 4) If traveling on an MIT sponsored trip (excluding internships and study abroad programs) you should register with International SOS prior to your departure. Please log on to http://controllers.mit.edu/insurance/ for additional information |

> using MIT Medical

Choosing a Primary Care Provider (PCP)

Having an ongoing relationship with a clinician with whom you can discuss your health concerns is the key to getting good medical care. Your Primary Care Provider, or PCP—a physician or nurse practitioner specializing in internal medicine—will provide and coordinate all of your medical care, including making arrangements for specialty consultations when needed, laboratory tests, and hospitalizations. Visit <http://web.mit.edu/medical> to find up-to-date information on available clinicians. To make your choice, submit the online clinician-choice form available at <http://web.mit.edu/medical/g-choosingform.html>.

If, for any reason, you find that you are unable to establish a comfortable relationship with your clinician, you may choose any other available clinician by submitting the online clinician-choice form as described above.

All students are encouraged to choose an MIT Medical PCP while attending MIT. However, please note that our physicians are not participating with other insurance programs. If you waive the MIT Student Extended Insurance Plan you should not change your PCP of record on your outside insurance. Depending on the requirements of your individual insurance plan, MIT physicians may not be able to authorize outside services. You may need to coordinate these services with your PCP of record.

Making an Appointment at MIT Medical

Call your PCP's office directly. You can find clinician phone numbers on the MIT Medical website at <http://web.mit.edu/medical>. If you have not chosen a PCP and are not sure who to call, you can contact the triage nurse at 617-253-4481. He or she can help you decide what to do next.

When making an appointment, it's helpful to briefly describe the reason for the visit, so the staff can schedule an appointment of the correct length and make sure the appropriate resources are available. If you are sick and need to be seen that day, let the staff know. At times, it may be appropriate to communicate with your clinician

by phone or email prior to the appointment. This can help answer questions about urgency or whether it would be useful to generate some additional information, such as lab tests, before the visit.

Urgent Care

MIT Medical is always open for urgent care, 24 hours a day, every day of the year. Examples of conditions requiring urgent care include high fever, earaches, sprains, and lacerations that require stitches. If the situation is urgent but not life threatening, call MIT Medical's Urgent Care Line, 617-253-1311, to find out what to do first. Based on your symptoms, we'll answer your questions and give you advice. You may call collect if you are outside the service area. Even if you don't call ahead, you can always be seen at MIT Medical, but you may have to wait. Like an emergency room, the most urgent medical cases are seen first.

Mental Health

MIT Medical's Mental Health Service provides consultation, crisis intervention, and treatment, including individual and group psychotherapy and psychopharmacology. The staff has expertise helping people deal with stress, relationship difficulties, academic pressure, depression and anxiety, learning problems and ADHD, eating concerns, insomnia, fatigue, alcohol and substance abuse, family issues, and general problems of daily living.

Seeing an MIT Medical mental health clinician is free for students. Call 617-253-2916 to make an appointment. Appointments are available Monday through Thursday, 8:30 a.m. to 7 p.m. and Friday, 8:30 a.m. to 5 p.m. Walk-in hours (for urgent needs) are Monday through Friday, 2 p.m. to 4 p.m. A clinician is available after hours and on weekends for emergencies by calling 617-253-2916.

All calls and visits are strictly confidential.

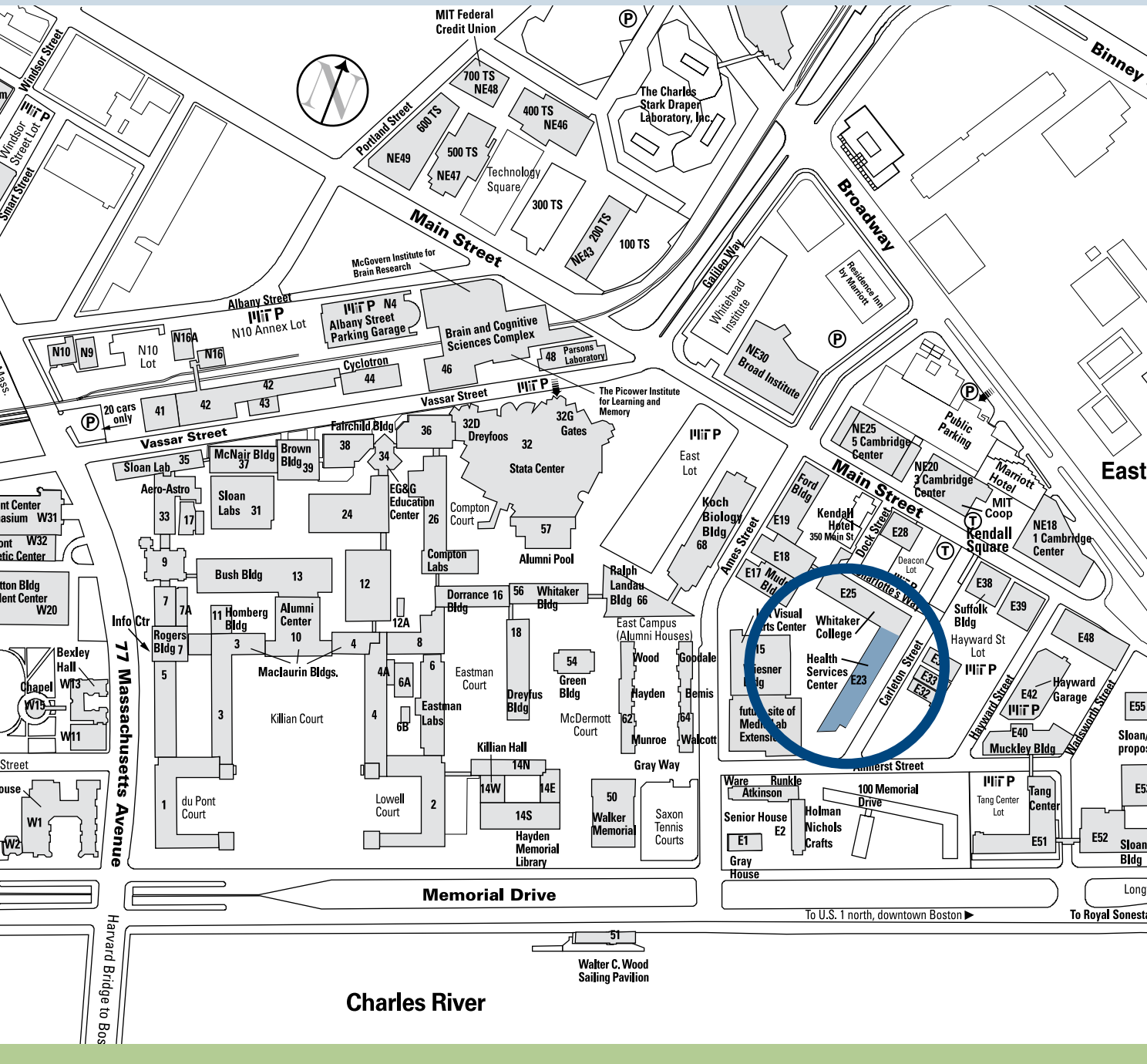
Online Access

Patient Online provides MIT Medical patients with a private and secure way to request appointments, refill prescriptions, review certain parts of their health history, and ask questions of participating clinicians anytime online. All you need to do is register for an account. To learn more, visit <http://web.mit.edu/medical/login.html>.

> tips for students

- * **All students can receive care at MIT Medical**, even if they waive the Student Extended Insurance Plan. Most services at MIT Medical are provided free of charge to students, because all students have the MIT Student Medical Plan paid for through tuition.
- * **Know your insurance.** Some services at MIT Medical—like eye exams, physical therapy, prescriptions, and obstetrics—are not covered under the MIT Student Medical Plan. Those services are covered under the MIT Student Extended Insurance Plan. If you don't keep the Extended Plan coverage, your other insurance may pay for some of these services at MIT Medical. Contact your insurance company before you make an appointment to find out what your benefits are, and be sure to bring your insurance card to your appointment. All students are encouraged to purchase the MIT Student Extended Insurance Plan so that MIT clinicians can coordinate any additional required services. Be aware that the MIT Student Extended Insurance Plan will be secondary to any other medical insurance.
- * **Always carry your insurance card.** Whether you have the MIT Student Extended Insurance Plan or other insurance, always have your insurance card when you see a provider, particularly if the provider is not at MIT Medical. If you have the MIT Student Extended Insurance Plan and you have not received your card, contact the Student Health Plan at 617-253-4371. If you are using insurance other than the MIT Student Extended Insurance Plan, know where to call for information about your benefits.
- * **If you have a question about your MIT Student Medical or Extended Insurance Plan coverage, ask!** Contact Claims and Member Services at mservices@med.mit.edu or 617-253-5979.
- * **Know yourself.** Make sure you know what medications you are taking and your medical allergies.
- * **Tell us your concerns.** Let your providers know when you have an urgent concern. You will be able to get care much sooner.
- * **Feel confident that your privacy is protected.** Unless you give your permission, nothing that is said or done at a visit with a provider at MIT Medical will be shared with your parents, your professors, or your friends. The only exception would be a life-threatening situation. For more information about MIT Medical's privacy practices, visit <http://web.mit.edu/medical/g-privacy.html>.

MIT's Hayward parking lot, located across the street from MIT Medical, is available, as space permits, for free patient parking when you have a medical appointment, for up to two hours. The entrance is on Hayward Street. Just let the parking attendant know you have a medical appointment, and have your parking slip stamped by your doctor's secretary after your appointment. Be sure to allow enough time to find alternate parking if the patient parking area is full.



> <http://web.mit.edu/medical>

Building E23 | 25 Carleton Street
Cambridge, MA | 02142

> telephone numbers

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|--|--------------|
| 24-hour Urgent Medical and Mental Health Care (voice) | 617-253-1311 |
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|-----|--------------|
| TTY | 617-258-0656 |
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General information 8:30 a.m. - 5 p.m.

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|-------------------|--------------|
| Cambridge (voice) | 617-253-4481 |
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| TTY | 617-258-0656 |
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| Lexington (voice) | 781-981-7080 |
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| TTY | 781-981-6600 |
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| Center for Health Promotion & Wellness | 617-253-1316 |
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| Claims and Member Services | 617-253-5979 |
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| Dental appointments, information | 617-253-1501 |
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| Gynecology & Obstetrics | 617-253-1315 |
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| Internal Medicine | 617-253-4481 |
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| Mental Health | 617-253-2916 |
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| Patient Advocate | 617-253-4976 |
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| Patient Billing (students) for services received at MIT | 617-253-4303 |
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| Pediatrics | 617-253-1505 |
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| Pharmacy | 617-253-1324 |
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|---------------------|--------------|
| Student Health Plan | 617-253-4371 |
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For additional telephone numbers and information,
visit our website at <http://web.mit.edu/medical>
or call the general information number listed above



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