**CampusCare**
A self-funded student health benefit plan for the students at the University of Illinois at Chicago including the Rockford and Peoria campuses. *Please note: The Urbana-Champaign and Springfield campuses have a different health insurance provider.*

**Academic Year**
Is from 12:00am on August 16\(^{th}\) to 11:59pm on August 15\(^{th}\). This is the coverage period for CampusCare.

**Appeal**
A request for CampusCare to review a decision that denied a benefit, payment or waiver.

**Balance Billing**
When a provider bills you for the balance remaining that CampusCare does not cover. This amount is the difference between the actual billed amount and the allowed amount. For example, if the provider charges $200 for a service and the allowed amount is $110. The provider may bill you for the remaining $90. In-network providers may not balance bill you for covered services, excluding collection of copayments, coinsurances or deductibles.

**Civil Union Partners**
A legal relationship between two people, either the same sex or opposite sex. To qualify to add a civil union partner as a dependent, a copy of the civil union partnership certificate must be submitted.

**Claim**
A request for a benefit (including reimbursement of a healthcare expense) that either you or your healthcare provider makes to CampusCare for items or services you think are covered.

**Coinsurance**
Your share of the costs of a covered healthcare service. Coinsurance is calculated as a percentage (for example 40%) of the allowed amount for the service for drug. For example: if the allowed amount for the service or drug is 100 dollars and your coinsurance is 40% you would owe $40. (This is not balance billing, you may have a coinsurance for some in-network and out-of-network services.)

**Case Management**
When a healthcare professional supervises the administration of medical and/or ancillary services to a patient.
Complications of Pregnancy
Conditions due to pregnancy, labor, and delivery that require medical care to prevent serious harm to the health of the mother or the fetus. Morning sickness and a non-emergency caesarean section generally are not complications of pregnancy.

Contract Year:
See definition for Academic Year.

Conversion Coverage
Coverage that allows a member who is no longer eligible for CampusCare and receives coverage through a succeeding carrier to keep CampusCare for a certain time period under certain conditions. CampusCare does not offer any conversion coverage.

Copayment
A fixed amount you pay for a covered health care service. For example, a $15 dollar copay for an office visit. Usually you pay the copay at the time of service however, you could get billed by the provider for the copayment.

Deductible
An amount you could owe during a coverage period (usually one year) for covered healthcare services before your plan begins to pay. Unlike most plans CampusCare’s deductible is $0.

Diagnostic Test: Tests to figure out what your health problem is. For example, an x-ray can be a diagnostic test to see if you have a broken bone.

Discharge Planning: Planning by a healthcare professional as to how long a member will be in the hospital, what the expected outcome will be, whether there will be any special requirements and what medical services need to be facilitated in advance.

Durable Medical Equipment (DME)
Equipment and supplies ordered by a health care provider for everyday extended use. DME may include: wheelchairs, hospital type beds, and traction equipment. DME is not exercise equipment, air conditioners, electric scooters or wheelchairs, ramps or other environmental devices, dehumidifiers, or whirlpool baths.
**Emergency Medical Condition:**
An illness, injury, symptom (including severe pain), or condition severe enough to risk serious danger to your health if you didn’t get medical attention right away. If you didn’t get immediate medical attention you could reasonably expect one of the following: 1) Your health would be put in serious danger; or 2) You would have serious problems with your bodily functions; or 3) You would have serious damage to any part or organ of your body.

**Emergency Medical Transportation:**
Ambulance services for an emergency medical condition.

**Emergency Room Care/ Emergency Services**
Services to check for an emergency medical condition and treat you to keep an emergency medical condition from getting worse.

**Enrollee**
Same as member.

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**Enrollment Period**
Period of time when you can submit waivers, reinstatements (to be covered from first day of semester), add dependents, and deleted dependents.

- **Fall Term:** starts no less than 45 days prior to the beginning of the term and ending 28 days after the start of the term.

- **Spring Term:** starts no less than 45 days prior to the beginning of the term and ending 28 days after the start of the term.

- **Summer Term:** starts no less than 45 days prior to the beginning of the term and ending 15 days after the start of the term.

**Excluded Services**
Health care services that CampusCare does not pay for or cover.

**Formulary**
A list of drugs CampusCare covers and your copay for each drug.

**Grievance**
A complaint that you communicate to CampusCare.
**Habilitation Services**
Health care services that help a person keep, learn or improve skills and functioning for daily living. Examples include therapy for a child who isn’t walking or talking at the expected age. These services may include physical and occupational therapy, speech-language pathology, and other services for people with disabilities in a variety of inpatient and/or outpatient settings.

**Hospice Services**
Services to provide comfort and support for persons in the last stages of a terminal illness and their families.

**Hospitalization**
Care in a hospital that requires admission as an inpatient and usually requires an overnight stay. Some plans may consider an overnight stay for observation as outpatient care instead of inpatient.

**Home Health Care**
Health care services and supplies you get in your home under your doctor’s orders. Services may be provided by nurses, therapists, social workers, or other licensed health care providers. Home health care usually doesn’t include help with non-medical tasks, such as cooking, cleaning or driving.

**Hospital Outpatient Care**
Care in a hospital that doesn’t require an overnight stay.

**In-Network**
The facilities, providers and suppliers CampusCare has contracted with to provide health care services.

**Letter of Credible Coverage**
A document that your health insurance company provides as proof that you were insured within the last sixty (60) days and terminated coverage with that health insurance company.

**Medically Necessary**
Health care services or supplies needed to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine.
**Minimum Essential Coverage**
Health coverage that will meet the individual responsibility requirement of the Affordable Care Act. Minimum essential coverage generally includes plans, health insurance available through the Marketplace or other individual market policies, Medicare, Medicaid, CHIP, TRICARE, and certain other coverage, such as student health benefit plans. CampusCare meets Minimal Essential Coverage guidelines.

**Non-Formulary Drugs**
Prescription drugs that are not listed on the CampusCare formulary. These are covered under CampusCare with a $40 deductible and a 10% coinsurance.

**Orthotics and Prosthetics**
Leg, arm, back and neck braces, artificial legs, arms, and eyes, and external breast prostheses after a mastectomy. These services include: adjustment, repairs, and replacements required because of breakage, wear, loss, or a change in the patient’s physical condition.

**Outpatient**
Services in a medical clinic, physician’s office or other healthcare facility where you are not considered Inpatient.

**Out-of-Network**
Providers who have not agreed to any prearranged fee schedule and are not in-network. Charges in excess of payment for authorized services at Out-of-Network providers is the responsibility of the member. All Out-of-Network services, other than emergency care, require an authorization from the CampusCare Medical Director.

**Physician Services**
Health care services a licensed medical physician, including and M.D (Medical Doctor) or D.O. (Doctor of Osteopathic Medicine), provides or coordinates.

**Preauthorization**
A decision by your health insurer or plan that a health care service, treatment plan, prescription drug or durable medical equipment (DME) is medically necessary.

**Pre-existing Condition**
A condition based on the fact that the condition was present before the date of enrollment under CampusCare, whether or not any medical advice, diagnosis, care or treatment was recommended or received before such a date. CampusCare does not exclude for pre-existing conditions.
**Premium**
The amount charged by CampusCare as the CampusCare Health Insurance Fee for benefits described under the Certificate of Coverage.

**Prescription Drug Coverage**
Coverage under a plan that helps pay for prescription drugs.

**Preventative Care (Services)**
Routine health care, including screenings, check-ups, and patient counseling, to prevent or discover illness, disease or other health problems. Part of these services are paid for by the Student Health service Fee with the balance paid by CampusCare. In the case of dependents the entire cost is paid by CampusCare.

**Primary Care Provider (PCP)**
A physician, including an M.D. (Medical Doctor) or D.O. (Doctor of Osteopathic Medicine), nurse practitioner, clinical nurse specialist, or physician assistant, as allowed under state law and the terms of the plan, who provides, coordinates, or helps you access a range of health care services.

**Provider**
An individual or facility that provides health care services. Examples include a doctor, nurse, physician assistant, hospital, surgical center, skilled nursing center and rehabilitation center.

**Referral**
A written order from your primary care provider for you to see a specialist or to get certain health care services. You must get a referral prior to seeing anyone except your primary care provider unless you are visiting an emergency room in the event of a true life threatening emergency. If you do not get a referral first CampusCare will not pay for your visit.

**RN**
Registered Nurse

**Screening**
A type of preventative care that includes tests or exams to detect the presence of something.

**Specialist**
A provider focusing on a specific area of medicine or a group of patients to diagnose, manage, prevent or treat certain types of symptoms and conditions.
**Specialty Drug**
A type of prescription drug that, in general, requires special handling or ongoing monitoring and assessment by a health care professional, or is relatively difficult to dispense.

**Student Health Service Fee**
A mandatory fee assessed to all students who are enrolled in classes. This mandatory fee covers specified health services not covered by CampusCare. This fee cannot be waived and is not administered by CampusCare.

**Urgent Care**
Care for an illness, injury, or condition serious enough that a reasonable person would seek care right away, but not so severe as to require emergency room care. Urgent Care visits are only covered when your primary care provider (Family Medicine) puts an order in your chart authorizing the visit.

**Usual and Customary**
The amount that your plan would pay if the provider was in-network. For CampusCare this is defined as 70% of billed charges.

**Women’s Health Provider**
An in-network provider of obstetrical and/or gynecological (OBGYN) services. Authorization or a referral is not required for routine women’s healthcare services, such as a well-woman exam.