PROTECT YOUR ADVENTURE.

Health and dental care can be very expensive, and unexpected costs can stop your adventure right in its tracks. That’s why we offer the Iowa State University Student and Scholar Insurance Program, or ISU SSHIP. It provides coverage to undergraduate and graduate students, visiting scholars and their dependents during their time at Iowa State.

Use this step-by-step guide to find answers to frequently asked questions and to enroll yourself and your dependents in ISU SSHIP, administered by Wellmark® Blue Cross® and Blue Shield® and Delta Dental of Iowa.

IN THIS GUIDE

3  What is insurance?
4  Do I have to get ISU SSHIP insurance?
5  Why would I buy insurance if I don’t have to?
5  What if I’m on my parents’ plan?
6  When can I enroll?
7  What should I do before I sign up?
8  How do I enroll?
12  What do I do if I get an error message?
12  Can I make changes to my coverage?
13  I’m enrolled — now what?
15  I don’t know what to do. Help!
“SO WHAT IS INSURANCE, ANYWAY?”

You buy insurance to protect yourself from financial loss. As an example, let’s look at health insurance. Health care in the United States can be very expensive, even for a simple doctor visit. If you get sick or hurt and you don’t have health insurance, the bills could pile up quickly and send you into deep debt. With health insurance, you pay a regular and affordable fee for your health care coverage. Then if you get sick or hurt, your health insurance will help pay for some or most of the cost of your care. You will be responsible for your share of the covered health services. Visit our website to learn more about health insurance costs.
"DO I HAVE TO GET ISU SSHIP INSURANCE? OR IS IT JUST NICE TO HAVE?"

It depends who you are! All ISU students taking enough credit hours, visiting scholars, and their dependents are either eligible or required to enroll. Some are even enrolled automatically. Check out the chart below to see where you land for both health and dental insurance.

<table>
<thead>
<tr>
<th></th>
<th>You are automatically enrolled.</th>
<th>You are required to enroll.</th>
<th>You can enroll, but it isn’t required.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DOMESTIC UNDERGRADUATE STUDENT</strong> (U.S. citizen or permanent resident)</td>
<td>“I’m an undergraduate student.”</td>
<td></td>
<td>HEALTH &amp; DENTAL</td>
</tr>
<tr>
<td></td>
<td>“I’m a dependent of an undergraduate student.”</td>
<td></td>
<td>HEALTH &amp; DENTAL</td>
</tr>
<tr>
<td><strong>DOMESTIC GRADUATE STUDENT</strong> (U.S. citizen or permanent resident)</td>
<td>“I’m a graduate student without assistantship.”</td>
<td></td>
<td>HEALTH &amp; DENTAL</td>
</tr>
<tr>
<td></td>
<td>“I’m a dependent of a graduate student without assistantship.”</td>
<td></td>
<td>HEALTH &amp; DENTAL</td>
</tr>
<tr>
<td><strong>GRADUATE ASSISTANT</strong></td>
<td>“I’m a graduate assistant.”</td>
<td></td>
<td>HEALTH</td>
</tr>
<tr>
<td></td>
<td>“I’m a dependent of a graduate assistant.”</td>
<td></td>
<td>HEALTH &amp; DENTAL</td>
</tr>
<tr>
<td><strong>INTERNATIONAL STUDENT</strong></td>
<td>“I’m an international student.”</td>
<td></td>
<td>HEALTH</td>
</tr>
<tr>
<td></td>
<td>“I’m a dependent of an international student.”</td>
<td></td>
<td>HEALTH</td>
</tr>
<tr>
<td><strong>VISITING SCHOLAR</strong></td>
<td>“I’m a visiting scholar.”</td>
<td></td>
<td>HEALTH</td>
</tr>
<tr>
<td></td>
<td>“I’m a dependent of a visiting scholar.”</td>
<td></td>
<td>HEALTH</td>
</tr>
</tbody>
</table>

*For additional information regarding enrollment, visiting scholars should visit the [ISU SSHIP website](#) or contact the ISU SSHIP office at isusship@iastate.edu. Dental insurance is not available to visiting scholars through ISU SSHIP.
“WHY WOULD I BUY INSURANCE IF I DON’T HAVE TO?”

Getting sick or hurt may be the last thing on your mind. You’re young, you’re healthy — but it pays to think about illnesses and injuries before they happen. Unexpected, uncovered health care challenges can lead to years of debt.

“WHAT IF I’M ON MY PARENTS’ PLAN?”

Young people in the United States can stay on their parents’ insurance until age 26. However, that coverage may not go as far as you think. For example, if you are from out of state, the doctors near in-network on your parents’ plan, meaning you could pay a lot more for care. Before enrolling in the ISU SSHIP plan, review the coverage available through your parents’ plan.

IN-NETWORK / OUT-OF-NETWORK

If the doctor or hospital you visit is in your insurance company’s network, your health care costs may be significantly less than if you go to an out-of-network provider.
You can sign up for ISU SSHIP insurance during the **open enrollment period** — a period of time that comes around once a year when you and your dependents can elect and change your health and/or dental insurance coverage. For ISU students and scholars, the open enrollment period is July 1 – Sept. 30, 2020.

You may also be eligible to enroll outside the open enrollment period if you have what’s called a **qualifying event**. A qualifying event is a major life change that makes you eligible to enroll in, or make changes to, your health and/or dental coverage outside of the open enrollment period dates. Visit our website for full details about qualifying events.

**For ISU SSHIP, qualifying events include:**

- Starting school at ISU during the spring or summer semesters  
  *(If you plan to start school in the fall, you must enroll during the open enrollment period)*
- You, your spouse, and/or children arriving in the U.S. from another country
- Marriage/domestic partnership
- Divorce
- Birth or adoption
- Involuntary loss of prior health or dental coverage
- Becoming eligible for an assistantship

**Open enrollment period**

A designated time period when you and your dependents can purchase health and/or dental insurance coverage. The open enrollment period for ISU students and scholars is: **JULY 1 – SEPT. 30, 2020**
**“WHAT DO I NEED TO DO BEFORE I SIGN UP?”**

ISU SSHIP has made enrollment a quick and easy online process. But there are things you need to do before you get started. Complete this pre-enrollment checklist.

<table>
<thead>
<tr>
<th>Task</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decide if you are enrolling in health and dental insurance, or just health insurance.</td>
<td>Visit our website for details about dental insurance and eligibility.</td>
</tr>
<tr>
<td>Decide if you are covering any dependents. Dependents include a spouse/domestic partner and children under age 26.</td>
<td></td>
</tr>
<tr>
<td>Gather the following information about yourself and all the dependents you are enrolling:</td>
<td></td>
</tr>
</tbody>
</table>
  - Local address  
  - Date of birth  
  - Social Security number  
  
  *International students and dependents: Call the ISU SSHIP office at (515) 294-4800 or (877) 477-7485 to get your ID number. Use it in place of a Social Security number when enrolling.* |
| Gather information about any additional insurance coverage you or your dependents already have. | |
| If you are Medicare-eligible, find your Medicare card and have it with you when you enroll. | |
“I’M READY! HOW DO I ENROLL?”

Has the open enrollment period arrived, or have you had a qualifying event? Have you completed the pre-enrollment checklist on page 7? Then you’re ready to go.

Enrolling is quick and painless with BluesEnroll, the easy-to-use online portal provided by ISU SSHIP’s plan administrator Wellmark Blue Cross and Blue Shield.

GO TO THE WEBSITE

You’ll find the BluesEnroll website at wellmark.bluesenroll.com. Or, you can get there by visiting the ISU SSHIP website at sship.hr.iastate.edu and clicking “ENROLL NOW.”

ENTER OR CREATE YOUR USERNAME AND PASSWORD

If you are a returning user, enter your username and password to log in. If not, click “Create an Account” and enter the required information. Once you create a username and password, you will automatically be logged in to the system.

Remember, if you are a graduate assistant or an international student, you are automatically enrolled for single health insurance coverage. If you need to add a spouse or dependent, call the ISU SSHIP office at (515) 294-4800 or (877) 477-7485 to get your ID number.
3 ELECT YOUR COVERAGE
Eelect your coverage by entering all the required information.

NOTE: If you are a new user, you will see this page. Click “Begin enrollment” to get started.

NOTE: If you are a returning user, you will see this page. Click “Edit your benefits” to get started.

4 ADD DEPENDENTS
Add any dependents you wish to include in your medical coverage this year. Dependents include your spouse, domestic partner, and/or children under age 26.
CHECK YOUR INFORMATION

Review your information carefully. (It’s easy to miss a digit in your Social Security number or forget to answer the Medicare coverage questions.) If you have double-checked everything and your information is correct, scroll down and click the “Save” button.

ELECT OR DECLINE DENTAL COVERAGE

Your enrollment for medical coverage is now complete. You can now elect or decline dental coverage. Click “Begin enrollment” and follow the instructions.
**ADD DEPENDENTS**
Add any dependents you wish to include in your dental coverage this year. Dependents include your spouse, domestic partner, and/or children under age 26. You can also choose to decline dental coverage on this page.

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**FINISH**
Click “Complete Enrollment.” You will see a confirmation screen. Your enrollment is now complete. You can edit your enrollment selections between now and Sept. 30, 2020, when the open enrollment period ends.
“OOPS! SOMETHING WENT WRONG ON MY SCREEN.”

If you try to enroll and receive an error message indicating that the system failed to verify your identity, contact ISU SSHIP at (515) 294-4800 or (877) 477-7485.

“UH, OH … I THINK I MADE A MISTAKE WHEN I ENROLLED. CAN I MAKE CHANGES TO MY COVERAGE?”

You can come back to wellmark.bluesenroll.com and log in again to make adjustments, but only during the open enrollment period from July 1 – Sept. 30, 2020. After the open enrollment period, you can only make changes or elect coverage if you have a qualifying event.

See page 6 of this guide or visit our website to learn more about qualifying events.
“I’M ENROLLED — NOW WHAT?”

HEALTH INSURANCE
You are now a member of Wellmark Blue Cross and Blue Shield, ISU SSHIP’s health insurance plan administrator. That means you get to take advantage of all the coverage, tools, and services that Wellmark has to offer. We recommend spending some time on the ISU SSHIP website at sship.hr.iastate.edu to learn all about your benefits plan, how to use it, and how to make money-saving health care choices.

When your Wellmark ID card arrives, you’ll be eligible for all kinds of member perks, tools, and services, including:

myWellmark®
Your secure member portal. Find helpful tools, check claims, review your benefits, get estimated costs for care, find a provider, and track your health care expenses — all in one place.

myWellmark Mobile App
All your health insurance tools and information — pocket-sized. It’s everything you need from myWellmark when you’re on the go. Find the app at the App Store® or Google Play™.

BeWell 24/7™
Real people. Real help. It’s Wellmark’s dedicated phone line for when you need answers to your health questions. Call (844) 84-BEWELL day or night.

Blue365®
Sign up for discounts and deals on healthy stuff — everything from shoes to glasses to fitness trackers.
If you enrolled in dental insurance, you are now a member of Delta Dental of Iowa. We recommend spending some time on the ISU SSHIP website to learn all about your dental plan, how to use it, and how to make dental care choices.

You’ll receive your Delta Dental ID card in the mail. If you don’t, check the address you entered into BluesEnroll. Your ID will be sent to that address. You can call Delta Dental at (877) 983-3582 to order a replacement card.

When your Delta Dental card arrives, you’ll be eligible for member perks, tools, and services, including:

**Member portal** — Find helpful tools, check claims, review your benefits, and track your dental expenses.

**Vision discount** — With DeltaVision®, you can get discounts on frames, lenses, contacts, and LASIK surgery.

**Delta Dental Mobile** — All your tools and information in the palm of your hand. Find the app at the [App Store](https://apps.apple.com) or [Google Play](https://play.google.com).

**DENTAL INSURANCE**
“I’M LOST AND DON’T KNOW WHAT TO DO. HELP!”

No problem! We know health and dental insurance can be confusing. Use these resources when you need support.

For questions about your health insurance:
Wellmark Blue Cross and Blue Shield ISU Customer Support Line
(800) 694-4110

For health-related questions:
BeWell 24/7
(844) 84-BEWELL

To make an appointment to see a doctor:
Thielen Student Health Center
(515) 294-5801

For questions about your dental insurance:
Delta Dental of Iowa Customer Service
(877) 983-3582

For questions about ISU SSHIP:
ISU SSHIP office
(515) 294-4800 or (877) 477-7485
isuusship@iastate.edu
Required Federal Accessibility and Nondiscrimination Notice

Discrimination is against the law
Wellmark complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Wellmark does not exclude people or treat them differently because of their race, color, national origin, age, disability or sex.

Wellmark provides:
• Free aids and services to people with disabilities so they may communicate effectively with us, such as:
• Qualified sign language interpreters
• Written information in other formats (large print, audio, accessible electronic formats, other formats)
• Free language services to people whose primary language is not English, such as:
• Qualified interpreters
• Information written in other languages

If you need these services, call 800-524-9242. If you believe that Wellmark has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: Wellmark Civil Rights Coordinator, 1331 Grand Avenue, Station 5W189, Des Moines, IA 50309-2901, 800-524-9242, Fax 515-376-9073, Email CRCompliance@Wellmark.com. You can file a grievance in person by mail, fax or email. If you need help filing a grievance, the Wellmark Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services electronically through the Office for Civil Rights Complaint Portal available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail, phone or fax at: U.S. Department of Health and Human Services, 200 Independence Avenue S.W., Room 509F, HHH Building, Washington DC 20201, 800-368-1019, 503-540-8760 or by mail, phone or fax at: U.S. Department of Health and Human Services, 200 Independence Avenue S.W., Room 509F, HHH Building, Washington DC 20201, 800-368-1019, 503-540-8760, or by mail, phone or fax at: U.S. Department of Health and Human Services, 200 Independence Avenue S.W., Room 509F, HHH Building, Washington DC 20201, 800-368-1019, 503-540-8760, or by mail, phone or fax at: U.S. Department of Health and Human Services, 200 Independence Avenue S.W., Room 509F, HHH Building, Washington DC 20201, 800-368-1019, 503-540-8760.


ATTENTION: Si habla español, los servicios de asistencia de idiomas se encuentran disponibles gratuitamente para usted. Comuníquese al 800-524-9242 o (TTY: 888-781-4262).

КРОМЕ СИ: Если вы говорите на русском языке, вы можете получить бесплатную помощь по телефону. Пожалуйста, звоните по номеру 800-524-9242 (или телетайп 888-781-4262).

ВНИМАНИЕ! Если ваш родной язык русский, вам могут быть предоставлены бесплатные переводческие услуги. Обращайтесь по телефону 800-524-9242 (телетайп 888-781-4262).

주의: 한국어로 상담이 필요하신 경우, 800-524-9242 번 또는 (TTY: 888-781-4262) 번으로 연락해 주십시오.

Bezkuštní příležitosti je na telefonu 800-524-9242 nebo (TTY: 888-781-4262).

ATTENTION: si vous parlez français, des services d’assistance dans votre langue sont à votre disposition gratuitement. Appelez le 800 524 9242 (ou la ligne ATS au 888 781 4262).


NAPOMENA: Ako govorite hrvatski, dostupna Vam je besplatna podrška na tekstualnom telefonu koji se nalazi na 800-524-9242 ili (tekstualni telefon za službu za osobe oštećene sluha: 888-781-4262).

Внимание! Если вы говорите на русском языке, вы можете получить бесплатные переводческие услуги по телефону 800-524-9242 (или телетайп 888-781-4262).


NAGÓNDÁNI: Ha magyarul beszélsz, szabad érteni a 800-524-9242 vagy (TTY: 888-781-4262) számra.

HYVINKÄLLÄ: Jos puhut suomea, olet voimassa olevassa kieliyhteisössä saatavilla yhteysnumero 800-524-9242 (TYY: 888-781-4262).


ДАЧИ: Ако говорите на български език, можете да получите безплатни преводни услуги по телефон 800-524-9242 (или телетайп 888-781-4262).

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