I. INTRODUCTION

The Board of Trustees of State Institutions of Higher Learning (IHL) is seeking proposals for student health insurance brokerage and advisory services. IHL seeks to utilize a competitive process to obtain the best and lowest quote for student health insurance and related services. IHL has determined that the most beneficial procurement method for these services is a competitive Request for Proposal (RFP) process. For purposes of this RFP, “IHL” shall mean both the IHL Board Office and the public universities, including The University of Mississippi Medical Center.

The Board of Trustees is the governing board which exercises oversight, management, and control over the State of Mississippi’s public universities. Those universities include Alcorn State University, Delta State University, Jackson State University, Mississippi State University, Mississippi University for Women, Mississippi Valley State University, The University of Mississippi, The University of Mississippi Medical Center, and The University of Southern Mississippi. Over 75,000 students enroll in IHL. The insurance sought, like the current system-wide policy, will not include the students at the University of Mississippi Medical Center, as UMMC maintains its own separate program.

The purpose of this RFP is to solicit quotes to create an insurance program where students can directly purchase health insurance and where universities can, when appropriate, purchase student health insurance for student workers. The resulting policy or policies should be available to students at all IHL institutions. Currently, approximately 3,403 students purchase insurance through an existing plan. The current policy is with UnitedHealthcare and brokered by Arthur J. Gallagher.

The resulting policy must meet both the coverage requirements of the Affordable Care Act and federal requirements of certain classes of international students who attend IHL universities. The policy will be voluntarily entered by individual students, or when purchased by a university for certain classes of student workers, directly by the university. IHL does not intend to mandate or require students to purchase the specific policy resulting from this RFP, but the number of insureds is expected to increase with marketing efforts since the plan is under utilized by many universities. Only Mississippi State, Ole Miss, and the University of Southern Mississippi have been significantly using the program thus far. Those three universities have required international students to purchase the policy through a hard-waiver process.
This RFP process is being conducted by the Student Health Insurance Selection Committee (SHIP Selection Committee), which will recommend the best and lowest quote to the IHL Board for approval.

II. PURPOSE

The purpose of this RFP is to secure the services of a qualified broker with the experience and expertise necessary to assist IHL in obtaining student health insurance that meets the needs of the IHL system. The desired outcome will be the selection of a broker as well as insurance coverage and related services. Brokers have been assigned to one or more markets, and are authorized to obtain quotes, but only from their assigned market or markets. The broker who is selected for policy year 2022-2023 will also be the broker for the following two policy years (provided the agreement is not terminated earlier) and be able to approach all viable markets in years two and three.

III. CONTRACT PERIOD

The IHL seeks to enter a three-year agreement with a broker from May 1, 2023, through April 30, 2026, although the broker will perform services prior to May 1, 2023, and through the termination date of any policy he or she places. The agreement dates for the broker are used to correspond with the projected annual, renewal, or multi-year insurance policy term or terms. The broker’s fee is expected to be based upon a commission connected with the purchase of policies by the insureds. The Agreement for brokerage services may be terminated by the broker, with or without cause, upon 120 days’ prior written notice. The IHL Board Office may terminate the agreement upon lesser notice, as specified in this RFP or any resulting contract.

The insurance policy or policies resulting from this RFP will cover enrolled students for an entire policy year, although the policy should be able to be purchased and/or billed for in lesser increments, such as by semester or monthly. At a minimum, the initial policy will have the ability to cover a 12-month period or term. IHL will also consider a two-or-three-year rate guarantee and renewal commitment by the insurer, although single year quotes are sufficient. IHL anticipates the policy inception date to be approximately August 1, 2023, or September 1, 2023. IHL anticipates a period in May, June, and July of 2023 whereby IHL, universities, the broker, and the insurer will coordinate efforts so as to make student enrollment as convenient and productive as possible. If approval of the insurance policy is needed from the Mississippi Insurance Department, the broker will ensure that this occurs timely.

IV. TIMELINE

The following is an outline of pertinent dates for this RFP. Dates are subject to change. Notification of any changes will be provided in writing to all brokers that have been assigned a market and have not withdrawn from the process as of the time of the clarification or change.
<table>
<thead>
<tr>
<th>October 10, 2022</th>
<th>RFP released</th>
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</thead>
<tbody>
<tr>
<td>October 24, 2022</td>
<td>All questions regarding the RFP and requests for information due to Chair by 4:00 p.m. CST</td>
</tr>
<tr>
<td>On or before November 4, 2022</td>
<td>Responses to appropriate questions sent</td>
</tr>
<tr>
<td>January 9, 2023</td>
<td>Proposals (with quotes) from brokers due to Chair by 4:00 p.m. CST</td>
</tr>
<tr>
<td>Week of January 23rd, 2023</td>
<td>Reserved for onsite broker finalist presentations, if requested by the Chair</td>
</tr>
<tr>
<td>On or about March 16, 2023</td>
<td>Notification of Award</td>
</tr>
</tbody>
</table>

All organizations that submit proposals in response to this RFP will be notified in writing of the outcome of the process. IHL may contact the top proposers to negotiate the best and final offer as well as final agreement terms, or IHL may make a selection based upon the proposals without further negotiation.

V. COMMUNICATIONS

Any verbal communications by IHL, the Chair, or the selection committee shall not be relied upon in any way to alter, amend, or expand the content or requirements of this RFP. Any modifications or clarifications will only be valid if in writing and from an authorized individual. During this RFP process, participating brokers and insurers are not permitted to, and thus agree not to, communicate with IHL (which includes each individual university and selection committee member) regarding this procurement except in connection with the described RFP process and its designated point of contact. Questions regarding the RFP should be submitted in writing electronically or by hard copy before October 24, 2022, 4:00 p.m. Central Standard Time. The designated point of contact for this RFP will be the Chair of the selection committee.

Mr. Daniel Hale  
Chair of the Student Health Insurance Committee  
360 Hardy Road  
Mailstop 9732  
Mississippi State, MS 39762  
dhale@saffairs.msstate.edu  
662.325.5895
For written submissions, copy Phil Cumberland.

Phil Cumberland  
Procurement and Property Officer, IHL  
3825 Ridgewood Road  
Jackson, MS 39211  
pcumberland@mississippi.edu

Responses to questions will be emailed to competing brokers at approximately the same time.

Submissions by email are encouraged. Please enclose 3 copies of your proposal if mailing a hard copy.

The Chair may request clarifications in regard to any proposal and IHL reserves the right to reject any or all proposals. Any proposal received that does not follow the general instructions or is not fully responsive may be considered to be “non-responsive” and be disqualified.

During this procurement process, competing brokers will not communicate or coordinate with each other in regard to the substance of their proposal. Communication to the Chair or IHL in regard to the substance of this proposal shall only be in writing so that responses can be provided in writing to all brokers contemporaneously and transparently.

The successful proposal(s) will be incorporated into the resulting Agreement(s). The proposals are subject to the "Mississippi Public Records Act of 1983", codified as section 25-61-1 et seq., Mississippi Code Annotated. This means that proposals, if requested by a third party, will be released as public records unless you or the owner of information in the proposal seeks a protective order from a court within the time stated by law. Proposals will not be disclosed outside of the RFP process at any time during the RFP process.

VI. PROCESS OVERVIEW – THREE STAGE PROCUREMENT

Stage One – Market Assignment

IHL, through a designated selection committee, has evaluated broker requests for market assignments. Brokers have been assigned exclusive authority to approach one or more specific insurers in order to obtain a competitive quote for student health insurance. In addition to obtaining quotes, brokers will provide other services for the benefit of IHL and its students.

Stage Two – Additional Information

Brokers will communicate with viable markets and determine what information the insurer will need or want in order to provide its lowest and best quote. The broker will make a request for that additional information to the Chair, and the selection committee will
attempt to collect the information so that the Chair can share it with all participating brokers.

Brokers, through their requests for market assignments, were asked to briefly address recommended coverage needs. If deemed necessary, the Chair may clarify or require specific coverages that are desired by the selection committee. This specification may be included with the Chair’s other responses to brokers, or it may be communicated at any time. Within the Chair’s discretion, he or she may solicit advice regarding recommended coverage terms or other matters, provided that all participating brokers are given an equivalent opportunity to provide a response.

Stage Three – Procurement of a Student Health Insurance Policy or Policies

Brokers will communicate with their assigned market(s) to promote and solicit the best and lowest quote possible. The quote will be submitted to the Chair as a proposal which shall include the information requested from the insurer in Sections VIII and IX. The proposal shall also confirm or demonstrate that the quoted policy and services will provide the specifications communicated by the Chair and this RFP.

The selection committee will evaluate the submitted proposals. Brokers with quotes that are determined to be finalists may be asked, at the selection committee’s discretion, to make onsite, virtual, or telephonic presentations. Such presentations may be considered by the selection committee in determining the best and lowest quote. If appropriate, IHL will recommend the best and lowest quote to its Board for approval.

The broker and insurer will perform services before and during the term of the insurance policy, unless a party terminates the relationship in accordance with this RFP.

VII. General Instructions

In preparing your response to any question or request for information in this RFP, you shall repeat each question followed by your response. Questions and answers shall be in the same order as found in the RFP. If you have additional information you would like to provide that was not relevant to the question and answer sections, you may include it in the back of your proposal as an appendix.

All documentation submitted in response to this RFP and to any subsequent requests for information pertaining to this RFP will become the property of IHL and will not be returned to the proposer.

The selected proposal will become an integral part of the contract and all representations made in the proposal will be binding. If you cannot provide a direct response to a question (e.g. your company does not collect or furnish certain information), please indicate the reason that you are unable to fully respond rather than providing general information that fails to answer the question.
FAILURE TO PROVIDE ALL INFORMATION REQUESTED IN THE FOLLOWING SECTIONS VIII AND IX MAY RESULT IN DISQUALIFICATION OF YOUR PROPOSAL.

VIII. MINIMUM INSURER QUALIFICATIONS

This section may be responded to by affirming that the insurer meets the minimum requirements and agrees to conform to Mississippi law to the extent any conflict arises in regard to the policy terms.

A. Legal Ability. The insurer must be authorized to do business in the State of Mississippi.

B. Best Ratings. The insurer must have current A.M. Best ratings of at least A IX.

C. Mississippi Law. The policy will contain a provision or endorsement to the effect that its terms shall conform to Mississippi law, or state that any terms contrary to Mississippi law will be stricken or amended so as not to be contrary to Mississippi legal requirements.

IX. INSURER QUESTIONNAIRE

This section may be responded to by the selected broker or the insurer, but all representations will become binding and part of the contract if the insurer’s quote is selected by IHL.

A. Financial Ratings. Affirm that the insurer is authorized to do business in Mississippi and state the company’s A.M. Best’s ratings.

B. Why This Insurer? What makes this insurer superior to other companies that provide student health insurance?

C. Insurance Quote. Clearly state the overall premium for a quoted policy to include all costs to IHL or its students, including premiums, commissions, fees, included services, and surplus lines taxes, if any. Specify whether the quoted amount is for one year, or if the quote is guaranteed for one or more renewal options. If IHL is quoted an option for renewal, specify all conditions of the optional renewal quote. The response to this section may be provided by reference to the quote or an exhibit, so long as the premium and all costs to IHL or students are readily apparent. The insured party will be the individual student, and his or her family members (or dependents) if purchased.

D. Subcontractors and Additional Costs. List any third-party subcontractors that will potentially provide any services related to the benefits and response of the quoted insurance policy. If some services are optional and at additional cost, specifically describe those services, who would be performing them, and any and all additional costs to IHL or students beyond the quoted policy premiums. Your response to this
item should include a discussion of any third-party claims administration, if applicable.

E. Related Added-Value Services. List and describe all significant related services that are being purchased or provided under the quoted insurance policy. Describe why the services provided are valuable, important, or add value. If additional fees are related to the services, state whether the services are optional as well as the specific fees which may apply if the services are elected by IHL or students.

F. Coverage Summary. State or provide a list (or declaration summarizing) applicable coverage limits, applicable sub-limits, and coverage exclusions. If the insurer is providing multiple quotes with different limits, specify which limits relate to each quote. The coverage must meet or exceed the requirements stated in Exhibit “B”, Coverage Requirements, as such exhibit may be amended by the Committee prior to receiving quotes. Specifically, confirm or address the following requirements which are based upon university feedback as desired for future policies.

1. Coverages. The policy will cover all of the required coverages listed in Exhibit “B”. Coverages are required unless labeled as optional or preferred.

2. Deductibles. The individual deductibles, for both in-network and out-of-network services, will not be more than $500.00. Deductibles may be lower than $500.00, and universities have voiced a preference for an in-network individual deductible of $250.00.

3. Medical Evacuation. The policy will include medical evacuation with a coverage limit of $50,000 or greater. This coverage may be secondary to any other applicable insurance.

4. Repatriation. The policy will include repatriation coverage with a limit of $25,000 or greater. This coverage may be secondary to any other applicable insurance.

5. Referral Requirements. No referral from the university health clinic will be required prior to service outside of a 50-mile radius of a university health center. While treatment by specialists, outside of an emergency situation, may first require a university clinic referral, health center referrals will not be required for primary care treatment occurring after university clinic hours. No university clinic referral will be required of insureds who are not university students (because covered dependents of participating students may not be eligible for treatment at all university health clinics).

6. University Clinic Coverage. The policy will cover 100% of university clinic charges with no copay. “University clinic charges” do not include lab tests performed by a separate reference lab, or otherwise include any “pass through billing” which is prohibited by any federal regulations or applicable laws.

7. University Pharmacies. Similar to university clinics, explain whether the policy would also provide a pharmacy benefit of coverage at 100% with zero copay at a university pharmacy. If this is not fully available, but some schedule of drugs are covered at no cost to students, please provide that information. This is not a required coverage for the policy, but rather is a
request that a university is interested in.

8. Tuberculosis Blood Tests. The policy will cover 100% of the costs for TB blood tests (Tspot or quantiferon) for international students. State which common "clearance tests" the policy will cover at 100%, even if the test is performed by a lab outside of the university health clinic. Some common tests identified by one university include sickle cell screens, vitamin D levels, troponin levels, pap smears, thyroid tests, hemoglobin A1C, urine cultures, and tissue biopsies.

9. Plan Eligibility. Universities prefer to have broad flexibility in defining participant eligibility. At a minimum, participants must be enrolled students or the family member or dependent of an enrolled student participant. For purposes of the policy, eligible students will also include graduate assistants, teaching assistants, and post-doctoral students. State any minimum eligibility requirements that are applicable to your quote, including any minimum enrollment requirements as well as any distinctions regarding online or virtual classes. If your minimum hour threshold significantly impacts the premium offered, you may provide multiple options. At least one option should be a six hour or lower minimum, and at least one university has expressed an interest in a one-hour minimum. While it is not required that the minimum be one-hour, it is required that you state a minimum floor for universities to consider when determining eligibility.

G. Sample or Specimen Policy. Provide a specimen policy.

H. Special Considerations for International Students. What are some of the advantages and disadvantages that international students should consider when deciding whether the quoted health insurance policy is best for them when compared to specialty policies aimed only at international students (or students outside their country of origin). These specialty policies often have lower premiums and lower coverage limits. Please provide any additional information you believe would be helpful to the selection committee as it relates to understanding coverage options for international students.

I. Implementation Plan and Customer Service. Provide a detailed implementation plan for establishing a successful student health insurance program for IHL. Describe the insurer’s commitment to customer service and responsiveness. Provide examples of processes and actions that will make the application and claims process easy for students to navigate. If a third party will assist with claims or customer service, please provide details regarding the structure and process. Describe your commitment and plan to grow participation across the IHL system by advertising the program and providing a positive experience for students. Please respond to the specific requests below, which are areas of concern for one or more universities.

1. Coverage Clarity for Wellness Benefits. Clearly describe what preventive and Wellness services are covered as well as any coverage details. There has been
some confusion in the past, by insureds and providers, as to what preventive and wellness services are covered and which are not. If you have any sample documents, like brochures or summary pamphlets, which can be provided to insureds or providers, please provide a copy as an appendix.

2. Welcome Packets. Will new policyholders receive written communications to inform them of pertinent information? Typical welcome packet documents would include a summary brochure, informational fliers, special coverage program information (like mental health or telehealth availability), or other information, whether by mail or email.

3. Marketing Materials. Will the insurer or broker prepare customized marketing materials and ensure that they are forwarded to enrolled, eligible, domestic students at a time ahead of the Open Enrollment period?

4. Payment Options. What payment options are available, whether monthly, by semester, or annually? Can payment of coverage for dependents be made on a monthly, rather than lump sum, basis?

5. Broker or Insurance Representative on Campus. If requested by a university, represent whether a representative will physically visit the specific campus at least once per policy year, whether for purposes of marketing the program to students or reviewing the program with university staff.

J. Clear Written Materials. Provide samples of brochures which have been provided to students, or which will be provided to students so that students can clearly understand a coverage summary. An insurer who wins this RFP process must provide student brochures if requested by a university, and its quality must be as good or better than the samples provided in this RFP. Also provide a sample certificate of coverage or similar documents which contains information that allows providers to easily understand applicable coverages.

K. Your Network of Providers. Describe why your network of healthcare providers and services is superior. Provide sufficient information regarding your network and its benefits so that a selection committee can compare your network with the network of other proposals. In that the selected policy is intended to be available for IHL students throughout Mississippi, please address whether your network adequately covers the entire State of Mississippi. Disclose whether you do or do not have healthcare providers in your network in each of the following cities or towns: Cleveland, Columbus, Gulfport, Hattiesburg, Itta Bena, Jackson, Lorman, Natchez, Oxford, and Starkville. Also disclose whether you do or do not have an in-network pharmacy option in each of the listed locations.

X. Evaluation Criteria

Initial Selection Criteria: The selection committee will compare quotes and evaluate the lowest and best quote or quotes by utilizing the following criteria.
The initial evaluation criteria will be scored out of 100 possible points with relative weights described below. Scoring will be on a curve, based upon the perceived difference between the quote being evaluated and other competing quotes which were received. Stated differently, points will be scored by the selection committee based upon the relative strengths or weaknesses of the proposals submitted. The points awarded for each scoring category will be reflective of how the particular proposal compares to other submissions for each category below.

A. Cost – See Responses to IX. C., D., and E.– 40 Points

**Finalist Selection Criteria:** If the selection committee deems it beneficial, the committee may select up to three finalists from the three top-scoring proposals based upon the above initial scoring criteria. Those three finalists may be invited to provide a presentation to the committee. The selection committee will make its selection of the lowest and best quote by majority vote. The committee’s final recommendation to the Board need not be based solely on the same criteria weights that were applicable in the initial selection phase.

XI. **REQUESTS FOR REVIEW, APPEAL, OR DISCUSSION**

A participating broker may request to meet with the Chair after the IHL Board has approved a policy. The request must be received by the Chair within 10 calendar days of the Board’s selection of a quote or March 27, 2023, whichever is later. The Chair, with advice from legal counsel, will determine the appropriate scope and format of post-award reviews.

XII. **OTHER TERMS**

A. **IHL Standard Contractual Terms.** The proposing broker must agree to IHL’s standard contractual terms. Prior to the award of a contract, IHL may or may not negotiate some of the standard terms. A copy of IHL’s standard contractual agreement is attached as Exhibit “A”. The insurer independently agrees that its policy language will conform to Mississippi law.

B. ** Modifications to the RFP.** IHL reserves the right to modify the RFP at any time prior to final award. Any modification will be communicated in writing to all entities which are participating in the process. No oral communications will modify this RFP.

C. **RFP Cancellation or Proposal Rejection.** IHL reserves the right to not select any proposal or to otherwise cancel this RFP process within its discretion.

D. **Withdrawal of Proposal.** Any broker may withdraw its proposal prior to February 1, 2023. Such withdrawal must be communicated in writing. Proposals which are not timely withdrawn shall be firm offers and binding upon the proposer if accepted by
IHL. All quotes shall remain open and offered for not less than 120 days.

E. Single Broker. IHL shall have a single point of contact for each competing entity during this procurement process which shall be responsible for all deliverables specified in the RFP and proposal. Any intent by the proposing broker to utilize subcontractors or third parties in performing the services described in this RFP must be described in detail as an appendix, addendum, or exhibit to its proposal (if not already clearly described in its proposal). The prime contractor shall be the single point of contact for all subcontracted or third-party work. A subcontractor or third party may only be used if disclosed specifically in the proposal or if prior express written consent is later provided by IHL. For partnerships that are competing for brokerage services, there must be a single point of contact and each participating entity must be disclosed in the proposal.

F. Award and Execution. IHL reserves the right to enter into a contract without further discussion of the proposal submitted based on the initial offers received. All proposals shall be considered valid for acceptance for a time period of at least 120 days from the date of submission. The RFP and proposal of the selected proposer shall become part of any contract initiated by IHL.

G. Cost of Preparing Proposals. IHL shall not be liable for any costs incurred by proposers in connection with participating in this competitive process. Costs associated with developing the proposal, preparing and traveling for presentations (if necessary), and any other expenses incurred by the proposer in responding to this RFP are entirely the responsibility of the proposer and shall not be reimbursed in any manner by IHL.

H. Contract Terminations. IHL may terminate the brokerage services at its discretion, with or without cause, upon 60 days’ written notice. If IHL terminates the brokerage services without cause, the broker shall be entitled to its fee or compensation through the current policy year which was negotiated by the broker. However, to the extent that the policy was a multi-year policy, or to the extent the policy terms contained a renewal option, the broker shall not be entitled to payment for more than the one-year policy period, which for purposes of broker compensation shall end each year as of the annual anniversary of the policy’s effective date.

If the broker is terminated for cause, the broker will be notified of that fact in writing, and compensation shall only be due through the date such notification is provided. The intent of this provision is that the broker be compensated for satisfactorily performed work during the policy period, on a pro-rata basis, up until the notification of termination.

The continuance of this contract is contingent upon the appropriation of funds to IHL. If the legislature fails to appropriate sufficient monies to provide for the continuation of the contract, the contract shall terminate upon 10 days’ written notice from IHL. If termination occurs due to non-appropriation of funds, the broker shall only be entitled to compensation on a pro-rata basis through the effective date of termination.
The insurance policy resulting from this process may be terminated by an insured according to the policy's standard terms. Insurer may not terminate coverage with less than 120 days' notice to IHL, except for the non-payment of premiums, which shall require only a 10 days' written notice to the insured. To the extent that the quoted insurance policy includes additional services for which cost was agreed to separately from the insurance premium, IHL may terminate such services under the same terms and conditions under which IHL may terminate the services discussed above.
Exhibit “A”

IHL Contractor Agreement
All quoted policies must meet the following:

A. **Affordable Care Act.** Compliance with the ACA.

B. **Visa Requirements.** Compliance with insurance required of international students by regulations relating to student visas. To the extent that certain coverages would only be applicable to international students, and not domestic students, those certain coverages may be provided as an endorsement only for internationals to the extent it would lower premium costs for domestic students specifically or overall.

C. **Minimum Terms.** The policy must contain at least the following coverage terms, or terms more advantageous to the insured, in regard to deductibles, co-insurance, and out-of-pocket annual maximum limits. Preferred Provider and In-Network Provider shall have the same meaning for purposes of this Exhibit. These requirements apply to the coverages in Section E. below, unless excepted by specific language in Section D. below.

- Deductible Per Insured Individual Per Year, Preferred or In-Network, $500
- Deductible Per Insured Individual Per Year, Out-of-Network, $500
- Deductible Family Per Year, In-Network, $2,000
- Deductible Family Per Year, Out-of-Network, $5,000
- Co-Insurance by Insured In-Network, 20%
- Co-Insurance by Insured Out-of-Network, 50%
- Out of Pocket Annual Max per Insured, In-Network, $7,000
- Out of Pocket Annual Max per Family, In-Network, $14,000
- Out of Pocket Annual Max per Insured, Out-of-Network, $15,000
- Co-Payments may be utilized for or apply to specific coverages

D. **Special Coverage Requirements.**

1. **Preventive Care.** In-Network Preventive Care is to be paid/covered at 100%, and not subject to co-pays, co-insurance, or the deductible.
2. **Emergency Care and Emergency Ambulance.** To the extent that co-insurance applies to emergency care, the Out-of-Network rate will be the same as the Network coinsurance rate. Co-Payments may apply to ambulance services.
3. **Prescription Drugs.** The prescription drug coverage shall utilize a co-payment structure for In-Network drugs, which structure may or may not have "tier" distinctions or distinctions based upon generics, brand names, preferred, and non-preferred status. Coinsurance and deductibles will not apply to In-Network drug purchases. Preventive drugs, including contraceptives, shall be covered at 100% In-Network. Insurers must clearly describe their prescription drug program.
4. **Maternity.** Maternity benefits shall be covered at 100% In-Network.
5. **Pediatric Dental and Pediatric Vision.** Coverages may distinguish between insureds based on being 18 years old and under. Coverage for dental and vision may vary
from the coinsurance levels stated in Section C. above, in that plan details for dental
and vision may vary considerably.
6. **Adult or All Insureds Vision.** This coverage is optional and may vary from the
coinsurance limits set forth above in Section C. It is advisable to include a vision
plan or option that at least includes an annual eye exam and options for glasses or
contact lenses.
7. **Assistance and Evacuation / Travel / Repatriation.** Medical Evacuation coverage
shall minimally be in the amount of $50,000, and repatriation of remains shall
minimally be in the amount of $25,000. The quoted policy shall have the coverage
required of international student visas, whether as part of the policy, as an
endorsement, or as a companion policy offered in connection with the primary policy.
8. **Gender Dysphoria / sex change / hormone / therapy / counseling.** This coverage is
optional, but one or more current policies include this coverage and prefer to keep it.
9. **Virtual Visits.** This coverage is optional, but it is preferred that the policy provide
coverage for these visits, at least to the extent that the university’s primary care
facility offers such services.
10. **Habitation Services (services or devices that improve or maintain daily functioning
    skills).** This coverage is optional.
11. **Infertility.** This coverage is optional.
12. **Voluntary Sterilization.** This coverage is optional.
13. **Podiatric / Certain Foot Conditions.** This coverage is optional.

E. **Required Coverages.** Policies need not group categories of coverages as indicated
below, but policies must provide coverage for the type of care indicated. Distinctions
within categories are permissible. Unless indicated otherwise or readily apparent, the
following coverages shall apply to both inpatient and outpatient treatments. For each of
the coverages, fully explain how your policy responds. If pre-certification applies, please
indicate. Your proposal should clearly indicate how the policy provides the following
coverages or coverage elements (coinsurance, copayments, 100% covered, deductible
applicability, or combination of these).

1. Room and Board, inpatient
2. Intensive Care, inpatient
3. Hospital Miscellaneous
4. Routine Newborn
5. Surgery
6. Assistant Surgeon Fees
7. Anesthetist
8. RN
9. Pre-admission testing, inpatient
10. Physician’s Visits
11. Physician’s Visits, Specialists if distinguished from general
12. Physiotherapy
13. Medical Emergency Expenses
14. Diagnostic X-Ray
15. Radiation Therapy
16. Lab Procedures
17. Tests and procedures
18. Injections
19. Chemotherapy
20. Prescription Drugs
21. Ambulance
22. Durable Medical Equipment; and prosthetics
23. Consultant Physician Fees
24. Dental Treatment (adult), may exclude routine treatment but must include accidental injury and impacted wisdom teeth.
25. Mental Illness / Mental Health; insurers may distinguish between inpatient and outpatient
26. Substance Use Disorder; insurers may distinguish between inpatient and outpatient
27. Maternity
28. Complications of pregnancy
29. Preventive Care
30. Reconstructive Breast Surgery after Mastectomy
31. Diabetes, although some coverages may be specifically limited
32. Home Health Care
33. Hospice
34. Rehabilitation; insurers may provide limits based on annual visits permitted by type of rehabilitation service
35. Urgent Care Center
36. Hospital Outpatient Clinic
37. Approved Clinical Trials
38. Transplantation Services; insurers may provide specific limits for categories, like travel and lodging.
39. Pediatric Dental and Pediatric Vision
40. Sleep Disorders
41. Assistance and Evacuation / Travel
42. Autism Spectrum Disorder
43. Transfusion / kidney dialysis

F. **Referral Requirements.** For non-emergency care, the policy may require certain referral requirements for certain coverages. For example, coverage may require that students utilize their campus clinic or care facility as an initial care location when appropriate. However, a referral from a clinic will not be required when the services originate further than 50 miles from a university campus clinic. The proposal must clearly disclose any referral requirements.