Your Guide to Caring for Your Health at Stanford University

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important deadlines
September 15, 2016
Deadline for all incoming students to waive or acknowledge health insurance coverage in Axess.
Dear Returning Student,

Welcome to the 2016–2017 edition of Student Health Matters, Vaden Health Center’s guide to the medical, counseling, and health promotion services available to undergraduate and graduate students.

Because your health and well-being is our highest priority as you strive for personal and academic success, we have compiled this resource to help you navigate your transition to campus. This edition will focus on two key objectives:

1. explaining Vaden Health Center’s role in caring for students, and
2. helping students (and parents) understand why having adequate health insurance is so important and offering guidance for the decisions that need to be made about coverage while at Stanford.

As you read, you’ll learn that the university’s mandatory Campus Health Service Fee covers most (but not all) of the professional services provided at Vaden Health Center. However, for some of the other on site services (such as specialty care and laboratory testing) or for care provided outside of Vaden (such as at Stanford Hospital), associated charges will apply. For this reason, it is critical that you understand whether any personal insurance you may opt to use while at Stanford will work with the healthcare facilities in the Palo Alto vicinity.

My colleagues and I at Vaden Health Center hope you thrive throughout your Stanford years. If you should need us, we’re right here on campus for you.

Sincerely,

James R. Jacobs, M.D., Ph.D.
Associate Vice Provost for Student Affairs
Executive Director, Vaden Health Center
Welcome Back!

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Highlights for 2016–2017

Campus Health Service Fee
For 2016-2017, the Health Fee will be $203 per quarter.

Insurance Decision Process
Automatic enrollment in Cardinal Care, the university sponsored health insurance plan, will continue for 2016–2017. Whichever decision you make, whether to remain enrolled or to waive coverage, you must take action. Both domestic and international students wishing to remain enrolled will need to acknowledge enrollment in the plan in Axess by the applicable deadline (September 15 for students returning in Autumn). The processes for waiving coverage (domestic students) or requesting an exemption from coverage (international students) have not changed for 2016–2017.

2016-2017 Cardinal Care
As with recent years, Cardinal Care will continue to be an annual plan. This means that purchase of the plan (or waiver/exception in a student’s first registered quarter of the academic year) is a commitment that will extend through August 31. For 2016–2017, the cost of the annual plan will be $4,968, a 6.2% increase over the 2015–2016 rate. Cardinal Care continues to offer comprehensive benefits, including the following:

- Dental coverage for diagnostic and preventive services at 100% (up to $1,000 annually)
- Preventive immunizations at no cost share to the enrollee
- Generic contraception at no cost share to the enrollee
- Tier 1 behavioral health/substance abuse office visits with a $25 copay
- Tier 1 specialist office visits with a $30 copay
- Tier 1 inpatient hospital coverage at 100% after a $500 copay per admission
- Tier 1 outpatient hospital services covered at 100% after a $250 copay
- Urgent care with a $50 copay
- Emergency Department care with a $100 copay—waived if admitted
- Specialty prescriptions (typically injectables) with a $50 copay
- Tier 1 out-of-pocket maximum of $2,000

The 2016-2017 Cardinal Care plan will continue to include dental coverage! The coverage will be administered by Delta Dental and will include diagnostic and preventive services covered at 100% when a Delta Dental PPO dentist is used. Read more on pages 19–20.
2016–2017 Stanford Student Dependent Health Insurance Plan ('Dependent Plan')

Stanford University will once again offer an insurance plan for students’ dependents. The monthly premium costs will increase by 6.9% in 2016–2017. Please see pages 30–31 for details.

Factors Contributing to Increased Costs in Insurance Coverage

Each year, a number of factors contribute to health insurance costs for students and their dependents. Chief among these factors are plan experience (the actual cost of all services provided in the prior year), trends in usage (what types of services enrollees are using), and where care is occurring, to name a few. Ways to reduce costs, including those that might result from modifications in enrollee behavior (such as the use of ‘urgent care’ services instead of ‘emergency’ services if a situation allows it) are routinely considered. Ultimately, the insurance plans reflect the combination of cost and coverage that best serves the needs of our diverse student population.

For Cardinal Care, the major driver of premium cost is again utilization of health care services. In recent years, new services without patient cost share have been added to meet the requirements of the Patient Protection and Affordable Care Act (PPACA). In addition, higher taxes and fees imposed by PPACA contribute to the cost.

For the Dependent Plan, additional PPACA taxes and fees have also contributed to the rise in cost, but even more of a factor for this smaller group of enrollees is high rates of utilization of care. Since the plan experience occurs among a small number of individuals, the impact of use is greater on overall cost and is reflected in the premiums.

Future Considerations

Recognizing that costs and coverage are important considerations for students, Vaden Health Center will continue to solicit student input for the future.

A Quick Note About Health Requirements

As a returning student, you met health requirements imposed by the university for the year in which you first came to Stanford. Because the requirements and recommendations change over time, it’s good to be attentive to current trends and concerns. For the 2016–2017 academic year, we encourage returning students to update immunity to pertussis (‘Whooping Cough’) by having a Tetanus, Diphtheria, and Pertussis (Tdap) vaccination if the last immunization occurred more than 10 years ago. We also recommend that high-risk young adults, ages 16–23, consider a Meningococcal B vaccine. And finally, we encourage returning students to take full advantage of the FREE flu shots offered at Vaden Health Center beginning in October. Visit the Vaden Health Center website at vaden.stanford.edu for details.
Caring for Your Health While at Stanford University

Being as healthy as possible is an integral component to achieving both your educational and personal goals. While at Stanford, you’ll be able to count on two resources for managing your health. The first is the care available at Vaden Health Center, the student health facility on campus, most of which is covered under the Campus Health Service Fee (Health Fee). The second is the care available through health insurance that you, as a Stanford student, are required to have. Both resources are described in more detail in the following sections.

Care Provided at Vaden Health Center: How Your Health Fee Works

Vaden Health Center is conveniently located on the southeast side of campus across from Wilbur Field. Our facility houses a center for high quality health care services with special attention to privacy, comfort, and convenience. Our goal is to be your go-to resource for most, if not all, of the services you’ll need while a student at Stanford. Our team of health care providers specializes in student health and understands the challenges that students sometimes face.

The Health Fee is a quarterly, mandatory fee charged to all students who are enrolled on the main Stanford campus. It covers most of the services that are available at Vaden Health Center. These services include primary medical care, counseling and psychological care (including short term therapy), and health and wellness programs, among others. Matriculated students studying outside the main campus are not assessed the Health Fee.

Health Fee Cost

For the 2016–2017 academic year, the Health Fee will be $203 per quarter. The charge is included in the student’s bill for each quarter that tuition is charged.

Care Provided at Vaden Health Center Under the Health Fee

Vaden Health Center offers a wide array of medical, mental health, and health promotion services on site, most of which are covered under the Health Fee. These include:

Primary Care Medical Services

- Medical appointments during weekday hours
- Urgently needed care during weekend and evening hours
- 24-hour telephone medical advice for urgent conditions
- Confidential web-based messaging to clinicians
- Web-based booking of weekday appointments

Counseling and Psychological Services (CAPS)

- Psychological evaluation and short-term therapy
- Initial psychiatric medication evaluation
- 24-hour crisis counseling services
- Case management/referral services
- Workshops that focus on students’ social, personal, and academic effectiveness

Wellness and Health Promotion Services

- Nutrition counseling and education
- Sexual health and relationship consultation and education
- Peer health education programs
- Health and wellness programs and events
Care Provided at Vaden Health Center
Not Covered by the Health Fee

The following services are provided at Vaden Health Center but are not covered under the Health Fee. We offer these services at Vaden Health Center as a convenience to our students. In most instances, charges will apply. The charge that is applicable will depend on the type of health insurance coverage the student has; the payment due at the time of service will typically range from the amount of an insurance copay to the full cost of the service. Under some circumstances, students may be able to recapture some or all of the cost if the service is covered by his/her private health insurance.

- Pharmacy prescriptions and other medications
- Physical Therapy treatment
- Travel Clinic visits and travel-related vaccinations
- Allergy, Immunization, and Injection Clinic services
- Immunizations and tests to meet Stanford’s entrance Health Requirements
- Most laboratory testing
- Long term therapy at Counseling and Psychological Services (CAPS)
- Psychiatric medication management at CAPS
- Physical examinations and associated lab tests and x-rays for employment, special programs, or other purposes
- Medical specialty consultations (those offered at Vaden Health Center currently include Dermatology, Optometry, Sports Medicine, and Eating Disorder Care)

How Do I Access Care at Vaden Health Center?

For routine, non-urgent care, Vaden Health Center hosts an online portal at vaden.stanford.edu called ‘VadenPatient’ that allows you to:

- Make general medical appointments
- Make counseling and psychological services appointments
- Make nutrition counseling appointments
- Make new Travel Clinic visit appointments
- Make Immunization and Injection Clinic appointments
- Make allergy shot appointments (excluding the first appointment)
- Make appointments with the Confidential Support Team (office located in Rogers House)
- Make anonymous HIV testing appointments
- Cancel appointments
- Communicate with your clinician
- Use a free screening tool to see if you are at risk for Hepatitis B (select ‘appointments’)

To access VadenPatient you will need your SUNet ID and your student ID. Once you’ve made your appointment:

- Plan to arrive 15 minutes ahead of your scheduled appointment time.
- Bring any medications you are currently taking and any medical records that are relevant to your visit.
- For a visit where no fees apply, check in at the computer in our lobby and then proceed to the appropriate reception area.
- For a visit where fees do apply (e.g., CAPS medication management, injections, physical therapy, etc.), check in first with the receptionist in our lobby and then proceed to the appropriate reception area.

For an urgent need that cannot wait for an appointment, you may come directly to Vaden Health Center during weekday clinic hours, evening clinic hours, or weekend clinic hours. Be sure to check the Vaden Health Center website at vaden.stanford.edu for the most current hours of operation. Look to the back page of this brochure for information about what to do when Vaden Health Center is closed.
CARE PROVIDED AT SITES OTHER THAN VADEN HEALTH CENTER:

The Importance of Health Insurance

What happens if you need care that isn’t offered at Vaden Health Center or isn’t covered by the Health Fee? Over the next several sections, we’ll explain why it’s so important to have good health insurance coverage while you are a student and discuss what you should be considering as you make decisions about the type of coverage you are going to carry while at Stanford. We’ll introduce the university’s student health insurance plan, Cardinal Care, and also tell you about options for your dependents. You’ll see some important action items along the way; pay close attention to them because there are deadlines and costs involved.
How Health Insurance in the United States Works

Health care in the United States can be very expensive. A single doctor’s office visit may cost several hundred dollars and an average three-day hospital stay can cost tens of thousands of dollars (or even more) depending on the type of care provided. Most of us could not afford to pay such large sums when we get sick, especially since we don’t know when we might become ill or injured or how much care we might need. Health insurance offers a way to reduce such costs to more reasonable, affordable amounts. The way it typically works is that the consumer (you) pays an up front premium to a health insurance company and that payment allows you to share ‘risk’ with lots of other people (enrollees) who are making similar payments. Since most people are healthy most of the time, the premium dollars paid to the insurance company can be used to cover the expenses of the (relatively) small number of enrollees who get sick or are injured. Insurance companies, as you can imagine, have studied risk extensively, and their goal is to collect enough premium to cover medical costs of the enrollees. There are many, many different types of health insurance plans in the United States and many different rules and arrangements regarding care. Following are three important questions you should ask when selecting health insurance:

Key Question #1. Where Can I Receive Care?
One way that health insurance plans control their costs is to influence access to providers. Providers include physicians, hospitals, laboratories, pharmacies, and other entities. Many insurance companies contract with a specified network of providers that has agreed to supply services to plan enrollees at more favorable pricing. If a provider is not in a plan’s network, the insurance company may not pay for the service(s) provided or may pay a smaller portion than it would for in-network care. This means the enrollee who goes outside of the network for care may be required to pay a much higher share of the cost.

If you have a plan through a parent, for example, and that plan’s network is in your home town, you might not be able to get the care you need in the Stanford area, or you might incur much higher costs to get that care.

Key Question #2. What Does the Plan Cover?
Under the Affordable Care Act, plans in the United States are now required to offer a number of ‘essential health benefits’ which include:

- Emergency services
- Hospitalization
- Some laboratory tests
- Maternity and newborn care
- Mental health and substance-abuse treatment
- Outpatient care (services you typically receive outside of a hospital)
- Pediatric services, including dental and vision care
- Prescription drugs
- Preventive services (e.g., some immunizations) and management of chronic diseases
- Rehabilitation services

For our international students, who might be considering coverage through a non U.S. based plan, asking the question, ‘what does the plan cover’ is extremely important.

Key Question #3. How Much Will It Cost?
As a general rule of thumb, the more you pay in premium up front, the less you will pay in the form of deductibles, copayments, and coinsurance when you access care. The less you pay in premium, the more you will pay when you access care.

The question for our students is, pay (a larger share) now? Or, pay (a larger share) later?

Consider that anticipated costs at the time of service may discourage students from getting needed care.
Out-of-Pocket Expenses

The terms ‘out-of-pocket cost’ and ‘cost sharing’ refer to the portion of your medical expenses you are responsible for paying when you actually receive health care. The monthly premium you pay for care is separate from these costs.

annual deductible
The amount you pay each plan year before the insurance company starts paying its share of the costs. If the deductible is $2,000, then you would be responsible for paying the first $2,000 in health care you receive each year, after which the insurance company would start paying its share.

copayment (or ‘copay’)
A fixed, up front amount you pay each time you receive care when that care is subject to a copay. A copay of $30 might be applicable for a doctor visit, after which the insurance company picks up the rest. Plans with higher premiums generally have lower copays, and vice versa. Plans that do not have copays typically use other methods of cost sharing.

coinsurance
A percentage of the cost of your medical care. For an MRI that costs $1,000, you might pay 20 percent ($200). Your insurance company will pay the other 80 percent ($800). Plans with higher premiums typically have less coinsurance.

annual out-of-pocket maximum
The most cost-sharing you will be responsible for in a year. It is the total of your deductible, copays, and coinsurance (but does not include your premiums). Once you hit this limit, the insurance company will pick up 100 percent of your covered costs for the remainder of the plan year. Most enrollees never reach the out-of-pocket limit but it can happen if a lot of costly treatment for a serious accident or illness is needed. Plans with higher premiums generally have lower out-of-pocket limits.
For the services that Vaden Health Center can’t or doesn’t provide, such as emergency care, hospitalization, or care when a student is traveling away from campus, or for those services that are offered at Vaden Health Center but not covered under the Health Fee, such as specialty care, physical therapy, or prescriptions, health insurance is needed. Because no one can accurately predict what type of medical care might be needed in the future, and because unforeseen scenarios can crop up in the course of an academic career, Stanford University requires that every registered student carry adequate health insurance. This requirement can be met either through Cardinal Care, Stanford’s student health insurance plan, or through an alternative insurance plan that has comparable benefits. The key is deciphering whether coverage you may already have, or are planning to purchase, will serve you well in the Stanford vicinity and/or wherever else you may be studying or traveling.

As part of the university’s requirement that all students have adequate health insurance coverage, every registered student is automatically enrolled in Cardinal Care in his/her first registered quarter of each academic year. This means that whatever you decide about coverage, you will need to take action to either:

- Accept Enrollment in Cardinal Care
- Or
- Waive

vaden.stanford.edu

Student Health Matters 11
Cardinal Care

Stanford University’s Student Health and Dental Insurance Plan

Cardinal Care is a comprehensive health insurance plan specifically designed for Stanford students. Medical benefits are administered by Health Net of California, mental health benefits are administered by Managed Health Network (MHN), a Health Net company, and dental benefits are administered by Delta Dental of California. Cardinal Care offers robust coverage at school, at home, and while traveling or studying abroad. This is important for Stanford students, many of whom are on the move. Cardinal Care also provides coverage for enrollees during leaves of absence, school breaks, immediately following graduation, and in quarters when students might not be registered for classes, such as Summer. Students enrolled in Cardinal Care have access to Stanford faculty specialists and hospital and emergency care at the university’s medical center.

We’ll give you a brief overview of Cardinal Care here, but we encourage you to take time to review details of benefits that are available:

✔ Additional information about health benefits is available in Cardinal Care’s Summary of Benefits and Coverage (SBC) located at www.healthnet.com/cardinalcare. You may also contact Health Net directly at (800) 250-5226 with questions.

✔ Additional information about dental benefits is available at www.deltadentalins.com/cardinalcare. You may also contact Delta Dental of California directly at (800) 765-6003.
Overview of Cardinal Care Medical Benefits

Cardinal Care is structured to complement the care that is available to students through Vaden Health Center. It has two tiers of coverage that let you decide where to get medical care. The cost at the time of care is dependent on where you receive treatment:

**Tier 1 Medical Care**
*Stanford University Medical Center and Menlo Medical Clinic*

Tier 1 coverage allows students to be seen at Stanford University Medical Center or Menlo Medical Clinic with a referral from a Vaden Health Center clinician. For office visits and most outpatient services (excluding surgery), you pay only a $25 or $30 copayment and Cardinal Care covers the balance.

For inpatient care at Stanford Hospital, coverage is at 100% after a $500 copay per admission.

**Tier 2 Medical Care**
*Any Health Net Preferred Provider (including Stanford University Medical Center and Menlo Medical Clinic)*

Tier 2 coverage allows students to receive care from any Health Net preferred provider. This flexibility can come in especially handy when traveling since Health Net offers coverage locally, nationally, and internationally. When Tier 2 is in effect, Cardinal Care pays 70% of eligible expenses after you pay a $500 annual deductible. This tier allows you to use Stanford University Medical Center or Menlo Medical Clinic without a referral from your Vaden Health Center clinician. It’s important to follow the directions on your individualized health insurance ID card when accessing health care off campus.

Overview of Cardinal Care Mental Health Benefits

MHN administers Cardinal Care’s mental health benefits through a local and national network of mental health clinicians. The greatest benefits (and lowest cost) to students occur when care is first sought at Vaden Health Center’s Counseling and Psychological Services (CAPS) unit, but students may also access care from an MHN provider directly. For more information, visit the Health Net site at [www.healthnet.com/cardinalcare](http://www.healthnet.com/cardinalcare).

Overview of Cardinal Care Dental Benefits

Delta Dental of California administers Cardinal Care’s dental coverage, which includes diagnostic and preventive care at 100% (up to $1,000 annually) when a Delta Dental PPO dentist is used. Basic restorative services are covered at 80% after a $25 deductible when services are provided by a PPO in-network dentist. Dental benefits are bundled with Cardinal Care’s medical and mental health benefits, and are not available separately.
Other Cardinal Care Features

A Partnership with Health Net for Off-Campus Medical Care
Being part of Health Net means that you have access to an extensive nationwide network of providers and pharmacies.

Prescription Drugs
When you purchase prescription drugs at the Vaden Health Center pharmacy, or any other participating Health Net pharmacy nationwide, you only pay a $15 copay for generic drugs, $35 copay for brand-name drugs, or $50 copay for specialty drugs.

Year-Round, Worldwide Coverage with On Call International¹
Cardinal Care provides coverage to enrollees whenever you are traveling more than 100 miles from your permanent residence.

If you need assistance for a medical emergency or behavioral health issue while traveling more than 100 miles from your permanent residence, you have access to comprehensive emergency assistance services provided by On Call International.² Some of these services include:

- Emergency medical evacuation³
- Medically necessary repatriation³
- Medical/behavioral health/dental/pharmacy/hospital referral and deposit arrangements
- Prescription drug replacement assistance

Print an On Call member ID card, Description of Services, and brochure from www.healthnet.com/cardinalcare.

Health Net Mobile
Health Net Mobile is the easiest way to connect to your HealthNet.com online account. Access plan, copay and deductible information on the go, as well as check your Mobile ID card to verify eligibility—available for Apple and Android devices!

Visit www.healthnet.com/cardinalcare for more information.

Decision Power ® Healthy Discounts
Health Net’s Decision Power Healthy Discounts program supports your good health with valuable discounts on health-related products and services, such as: fitness club memberships, vitamins, eyewear, and weight management programs (including Weight Watchers and Jenny Craig).

Health Net’s Website Is a Time-Saving Option
Health Net has created a dedicated custom website exclusively for Stanford students. When you become a Health Net member, go online to www.healthnet.com/cardinalcare, click Register and fill out the registration form. It’s that simple. Be sure to have your ID card handy.

As a registered member of the website, you’ll have 24/7 access to the user-friendly tools and health information you need most. You can:

- View your medical benefit details and copay amounts.
- Print a temporary ID card or order a new one.
- Participate in Health Promotion programs.
- Chat live with a Health Net Customer Contact Center agent Monday through Friday, 8:00 a.m. to 6:00 p.m. Pacific time.
Personalized Identification Card

All Cardinal Care members will receive a Health Net ID card. This card identifies you as a Cardinal Care member and gives you access to preferred providers and pharmacies nationwide. Keep it with you and present it whenever you receive medical care.

ID cards will be sent to the campus mailing address listed in your Axess account. Your identification number will be your 8-digit Stanford University ID with a prefix of “U.”

Health Net offers several options for accessing an image, printing a copy, or ordering a replacement of your ID card:

- via smartphone with Health Net Mobile; or
- online at www.healthnet.com/cardinalcare; or
- by calling (800) 250-5226.

Cardinal Care Coverage Begins on September 1
And Ends on August 31

More details can be found at vaden.stanford.edu/insurance or contact the Vaden Health Center Insurance and Referral Office at (650) 723-2135 or via helpsu.stanford.edu.

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1 This is only an outline of your plan benefits. Please refer to the Description of Services which can be downloaded at www.healthnet.com/cardinalcare for conditions, limitations and exclusions.

2 Travel period must not exceed one year.

3 Medical evacuation and repatriation services must be pre-approved and arranged by On Call International.

This overview provides highlights of benefit information about Cardinal Care, the Stanford student health insurance plan. Your plan contract, which you will receive after you enroll, contains the exact terms and conditions of your Health Net coverage. If there is a discrepancy between the information provided in this brochure and the provisions of the plan documents, the plan documents will govern.

You have access to Decision Power through your current enrollment with Health Net Life Insurance Company. Decision Power is not part of Health Net’s commercial medical benefit plans. It is not affiliated with Health Net’s provider network, and it may be revised or withdrawn without notice. Decision Power services, including clinicians, are additional resources that Health Net makes available to enrollees of Health Net Life Insurance Company.

Health Net Life Insurance Company, Inc. and Managed Health Network, Inc. (MHN) are subsidiaries of Health Net, Inc.

The MHN family of companies includes Managed Health Network, MHN Services and MHN Government Services. Health Net, Decision Power and Managed Health Network are registered service marks of Health Net, Inc. or its affiliates. All other identified trademarks/service marks remain the property of their respective companies. All rights reserved.

Photos: Alex Johnson
### MEDICAL BENEFITS

<table>
<thead>
<tr>
<th>Plan provision</th>
<th>TIER 1</th>
<th>TIER 2¹²³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stanford University Medical Center (with a referral from Vaden Health Center)</td>
<td>None</td>
<td>$500</td>
</tr>
<tr>
<td>Health Net PPO Providers in California and First Health Providers outside California</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual deductible (for all services)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Precertification Penalty for not precertifying treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Health Net requires precertification for inpatient services such as admission to a hospital, surgery or maternity stay.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual out-of-pocket maximum</td>
<td>$2,000</td>
<td>$4,000</td>
</tr>
<tr>
<td>(Excludes some family planning services, expenses related to noncertified services, and services not covered under the plan.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime maximum for medical coverage</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>Preventive care</td>
<td>$0</td>
<td>$0 (deductible waived)</td>
</tr>
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</table>

#### Emergency and urgent care services

<table>
<thead>
<tr>
<th>Service</th>
<th>TIER 1</th>
<th>TIER 2¹²³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency room</td>
<td>$100 per visit (waived if admitted, no referral necessary)</td>
<td>$100 per visit (waived if admitted)</td>
</tr>
<tr>
<td>Urgent care</td>
<td>$50</td>
<td>$50</td>
</tr>
</tbody>
</table>

#### Surgery

<table>
<thead>
<tr>
<th>Service</th>
<th>TIER 1</th>
<th>TIER 2¹²³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon or assistant surgeon service</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>$250 copay</td>
<td>70% after you meet the plan year deductible</td>
</tr>
<tr>
<td>Hospital and skilled nursing facility stays</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semiprivate hospital room or intensive care unit with ancillary services (includes acute care detoxification admissions)</td>
<td>100% after a $500 copay per admission</td>
<td></td>
</tr>
<tr>
<td>Primary care physician office visit</td>
<td>No charge if provided by Vaden Health Center</td>
<td>No charge if provided by Vaden Health Center; 70% after you meet the plan year deductible for services provided outside Vaden Health Center</td>
</tr>
<tr>
<td>Plan provision</td>
<td>TIER 1</td>
<td>TIER 2&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Outpatient specialist and consultant visits</td>
<td>100% after a $30 copay for each visit</td>
<td>70% after you meet the plan year deductible</td>
</tr>
<tr>
<td>Rehabilitative therapy</td>
<td>100% after a $30 copay for each visit</td>
<td>100% after a $40 copay for each visit (deductible applies)</td>
</tr>
<tr>
<td>(including physical, speech, occupational, respiratory and cardiac therapy)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>General medical services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chemotherapy/radiation therapy/nuclear medicine&lt;sup&gt;6&lt;/sup&gt;</td>
<td>100% after a $30 copay for each visit</td>
<td></td>
</tr>
<tr>
<td>(professional service only)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organ transplants&lt;sup&gt;6&lt;/sup&gt;</td>
<td>100%</td>
<td>70% after you meet the plan year deductible</td>
</tr>
<tr>
<td>(nonexperimental and noninvestigational)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood, blood plasma, blood derivatives, and blood factors&lt;sup&gt;6&lt;/sup&gt;</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>X-ray and laboratory</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>(excluding complex radiology)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complex radiology&lt;sup&gt;6&lt;/sup&gt;</td>
<td>100% after $50 copay per test</td>
<td></td>
</tr>
<tr>
<td>(e.g., MRI, CT, PET, SPECT, MUGA, ultrasound)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnancy and maternity care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal delivery, cesarean section and complications of pregnancy</td>
<td>100% after a $500 copay</td>
<td>70% after you meet the plan year deductible</td>
</tr>
<tr>
<td>Prenatal office visits</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Postnatal office visits</td>
<td>100% after a $25 copay for each visit</td>
<td></td>
</tr>
<tr>
<td>Genetic testing of fetus</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Reproductive health&lt;sup&gt;6&lt;/sup&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infertility&lt;sup&gt;6&lt;/sup&gt;</td>
<td>50%</td>
<td>50% after you meet the plan year deductible</td>
</tr>
<tr>
<td>(services that diagnose or evaluate infertility)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female Sterilization</td>
<td>100%</td>
<td>100% covered; deductible waived</td>
</tr>
<tr>
<td>Male Sterilization</td>
<td>100% after a $50 copay</td>
<td>100% after a $100 copay</td>
</tr>
<tr>
<td>Annual refractive eye exam</td>
<td>100% after a $30 copay</td>
<td></td>
</tr>
<tr>
<td>Prescriptions filled at Vaden Health Center or another Preferred Health Net pharmacy</td>
<td>$15 copay for generic drugs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$35 copay for brand-name</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$50 copay for specialty drugs</td>
<td></td>
</tr>
</tbody>
</table>

<sup>1</sup> Includes care provided by health care professionals and services provided by Stanford University Medical Center (with a referral from Vaden Health Center).<sup>2</sup> Includes care provided by Health Net PPO Providers in California and First Health Providers outside California.<sup>3</sup> Includes care provided by Stanford University Medical Center. Includes care provided by Stanford University Medical Center (with a referral from Vaden Health Center). Includes care provided by Health Net PPO Providers in California and First Health Providers outside California.<sup>4</sup> Includes care provided by Stanford University Medical Center. Includes care provided by Health Net PPO Providers in California and First Health Providers outside California.<sup>5</sup> Includes care provided by Stanford University Medical Center. Includes care provided by Health Net PPO Providers in California and First Health Providers outside California.<sup>6</sup> Includes care provided by Stanford University Medical Center. Includes care provided by Health Net PPO Providers in California and First Health Providers outside California.
Cardinal Care Behavioral Health Benefits

<table>
<thead>
<tr>
<th>Mental and Substance Use Disorder Treatment</th>
<th>MHN Network Provider</th>
<th>Out-of-Network Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outpatient treatment</strong></td>
<td>$25 copay</td>
<td>Not covered</td>
</tr>
<tr>
<td><strong>Inpatient treatment in a hospital or residential facility</strong></td>
<td>100% after a $500 copay per admission</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

1. Cardinal Care may not cover all your health care expenses. The plan excludes coverage for certain services and contains limitations on the amounts it will pay. Out-of-network providers are not covered.
2. For services to be covered at Stanford University Medical Center under Tier 1, you must be referred by a Vaden Health Center clinician.
3. Health Net First Health providers are made available to members outside of California. To search for a Health Net First Health provider, go to www.healthnet.com/cardinalcare or call 1-800-250-5226.
4. Providers include doctors, hospitals and pharmacies, including Stanford University Medical Center.
5. Preventive care includes services that have been identified as preventive in the following areas: annual exams, vision/hearing screenings, newborn and well-woman care, and lab and x-ray services.
6. These services require precertification. Refer to the Student Handbook for details.
7. This table is only an overview. For complete information, refer to the Summary of Benefits and Coverage available at www.healthnet.com/cardinalcare.
Go PPO!

You can visit any licensed dentist under Cardinal Care’s dental plan, but you’ll maximize plan value by selecting a Delta Dental PPO\(^1\) dentist. PPO network dentists have agreed to reduced contracted rates and can’t “balance bill” you for additional fees.\(^2\)

Find a dentist at deltadentalins.com.\(^3\)

Convenient Online Services: deltadentalins.com

- Create a free Online Services account
  from your PC or smartphone to view benefits, eligibility and claims status or check average dental costs in your area.
- Update your dental benefit statement delivery preference: Go paperless!
- Find a Delta Dental PPO dentist near you.

No ID Card Necessary

Just provide your dental office with your name, birth date and enrollee ID or social security number. Register for Online Services to print an ID card or pull it up on your smartphone at the dentist’s office. Your enrollee ID is your 8-digit Stanford University ID number.

Hassle-Free Transition and Easy Benefits Coordination

New to Delta Dental PPO? This plan covers treatment started and completed after your plan’s effective date of coverage.\(^4\) If you’re covered under two plans, ask your dentist to include information about both plans with your claim, and we’ll handle the rest.

**LEGAL NOTICES:** Access federal and state legal notices related to your plan: deltadentalins.com/about/legal/index-enrollee.html

\(^1\) In Texas, Delta Dental Insurance Company offers a Dental Provider Organization (DPO) plan.

\(^2\) Enrollees are responsible for any coinsurance, deductible, amount over the plan maximum and charges for non-covered services.

\(^3\) Verify that your dentist is a contracted Delta Dental PPO network dentist before each appointment.

\(^4\) Applies only to procedures covered under your plan. If you began treatment prior to your effective date of coverage, you or your prior carrier will be responsible for any costs. Group- and state-specific exceptions may apply. Enrollees currently undergoing active orthodontic treatment may be eligible to continue treatment under Delta Dental PPO. Review your Evidence of Coverage, Summary Plan Description or Group Dental Service Contract for specific details about your plan.
Summary of Cardinal Care Dental Benefits

<table>
<thead>
<tr>
<th>Eligibility</th>
<th>Student Only</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductibles</strong></td>
<td></td>
</tr>
<tr>
<td>Delta-Dental-PPO dentists:</td>
<td>$25 per student each plan year</td>
</tr>
<tr>
<td>Non-Delta-Dental-PPO dentists:</td>
<td>$50 per student each plan year</td>
</tr>
<tr>
<td><strong>Deductibles waived for diagnostic and preventive dental care?</strong></td>
<td></td>
</tr>
<tr>
<td>Delta-Dental-PPO dentists:</td>
<td>Yes</td>
</tr>
<tr>
<td>Non-Delta-Dental-PPO dentists:</td>
<td>No</td>
</tr>
<tr>
<td><strong>Maximum Benefit</strong></td>
<td></td>
</tr>
<tr>
<td>Delta-Dental-PPO dentists:</td>
<td>$1,000 per person each plan year</td>
</tr>
<tr>
<td>Non-Delta-Dental-PPO dentists:</td>
<td>$750 per person each plan year</td>
</tr>
<tr>
<td><strong>Waiting Period for Basic Benefits</strong></td>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Benefits and Covered Services*</th>
<th>Delta-Dental-PPO Dentists**</th>
<th>Non-Delta-Dental-PPO Dentists**</th>
</tr>
</thead>
</table>
| Diagnostic and Preventive Services
  Exams, cleanings, x-rays and sealants | 100%                         | 50%                             |
| Basic Services
  Fillings and simple extractions | 80%                          | 50%                             |
| Endodontics (root canals)
  Covered Under Basic Services | 80%                          | 50%                             |
| Periodontics (gum treatment)
  Covered Under Basic Services | 80%                          | 50%                             |
| Oral Surgery
  Covered Under Basic Services | 80%                          | 50%                             |
| Major Services
  Crowns, inlays, onlays and cast restorations | Not covered | Not covered |
| Prosthodontics
  Bridges and dentures | Not covered | Not covered |

* Reimbursement is based on Delta Dental maximum contract allowances and not necessarily each dentist’s submitted fees.

** Reimbursement is based on PPO contracted fees for PPO dentists and the program allowance for non-Delta Dental dentists. Please note that Delta Dental Premier® dentists are paid at the out-of-network level of benefits.

This benefit information is not intended or designed to replace or serve as the plan’s Evidence of Coverage or Summary Plan Description. If you have specific questions regarding the benefits, limitations or exclusions for your plan, please consult your school’s benefits representative.

See back inside cover for Cardinal Care contact information and resource guide.
Cost and Coverage Dates for Cardinal Care

Cost is a major consideration for many of our students. Cardinal Care has comprehensive benefits that provide exceptional coverage. Taxes and fees imposed by health care reform have contributed to the price. In some instances, subsidies and other aid may be available to help offset the premium.

Cardinal Care is an annual health insurance plan which runs September 1 through August 31 each year. It includes coverage in Summer quarter (whether the student is registered that quarter or not), For most students (i.e., those who enter the university in Autumn quarter), the annual fee is billed over 3 quarters for 4 quarters of coverage. The annual cost for Cardinal Care for the 2016–2017 academic year is $4,968. Most students are charged $1,656 in Autumn, $1,656 in Winter, and $1,656 in Spring for the annual period and are not billed in Summer.

The 2016–2017 Cardinal Care Cost and Coverage Table below provides information about the charges enrollees will see on the university bill, as well as other important details, by quarter, based on the student’s first registered quarter at Stanford.

### 2016–2017 Cardinal Care Cost and Coverage Based on Quarter of Entry

<table>
<thead>
<tr>
<th>First Quarter of enrollment at SU</th>
<th>Cardinal Care Coverage Period</th>
<th>Months of Coverage</th>
<th>Total Cost</th>
<th>Autumn</th>
<th>Winter</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn</td>
<td>Sep 1 – Aug 31</td>
<td>12</td>
<td>$4,968</td>
<td>$1,656</td>
<td>$1,656</td>
<td>$1,656</td>
<td>$0</td>
</tr>
<tr>
<td>Winter</td>
<td>Jan 1 – Aug 31</td>
<td>8</td>
<td>$3,312</td>
<td>$1,656</td>
<td>$1,656</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Spring</td>
<td>Apr 1 – Aug 31</td>
<td>5</td>
<td>$2,070</td>
<td>$2,070</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Summer</td>
<td>Jun 1 – Aug 31</td>
<td>3</td>
<td>$1,242</td>
<td>$1,242</td>
<td>$0</td>
<td>$621</td>
<td>$0</td>
</tr>
</tbody>
</table>

### ALL Students Are Initially Enrolled in Cardinal Care*

As part of the university’s requirement that all students have sufficient health insurance coverage, every registered student is initially automatically enrolled in Cardinal Care in his/her first registered quarter of each academic year. See page 23 for more information. The health insurance coverage periods, based on quarter of entry, are as follows:

- **Autumn**
  Coverage is for 12 months (September 1 through August 31) and charges will occur in Autumn, Winter, and Spring quarters for the full annual period.

- **Winter**
  Coverage is for 8 months (January 1 through August 31) and charges will occur in Winter and Spring quarters.

- **Spring**
  Coverage is for 5 months (April 1 through August 31) and the entire charge will occur in Spring quarter.

- **Summer**
  Coverage is for 3 months (June 1 through August 31).

*Students must take action to waive coverage.*
Insurance Options

Cardinal Care has broad coverage that has worked well for our students in many diverse scenarios over time. Other ways in which the requirement for adequate health insurance can be met are:

- Coverage through a parent’s employer plan
- Coverage through a spouse’s plan if you are married
- Coverage with a plan purchased through the Health Insurance Marketplace

We have provided a tool below for your use in comparing any plan you may be considering to Cardinal Care. You’ll need to decide which plan, ultimately, is best for you to obtain necessary care while at Stanford.

**Comparison Worksheet for Use in Choosing Health Insurance Coverage for 2016–2017**

The following chart will help you compare Cardinal Care with your family health insurance policy, or any other plan you might be considering, so that the best decision can be made to protect your health while at Stanford. These questions assume that the plan you are comparing meets minimum essential coverage as defined under the Affordable Care Act. International plans may not adhere to the minimum essential coverage mandates that U.S. plans are subject to, so international students must have health insurance that meets or exceeds minimum standards outlined by the university in order waive coverage through Cardinal Care. See the ‘Waiving Cardinal Care—for International Students’ section on Page 25 for additional information.

<table>
<thead>
<tr>
<th>Points of Comparison</th>
<th>Cardinal Care</th>
<th>Other Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual (premium) cost for the plan</td>
<td>$4,968</td>
<td>?</td>
</tr>
<tr>
<td>Annual deductible of $1,000 or less</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Annual out of pocket maximum of $2,000 or less (Tier 1)</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Covers inpatient and outpatient medical care (including specialty visits and follow up care) in the San Francisco Bay Area with access to providers at Stanford University Medical Center (Many HMO and POS managed care plans require a visit with a participating primary care physician for all non-emergency care and referrals).</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Covers inpatient and outpatient mental health care in the San Francisco Bay Area with access to providers at Stanford University Medical Center. (Many HMO and POS managed care plans require a visit with a participating primary care physician for all non-emergency care and referrals).</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Includes dental coverage?</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Provides worldwide coverage and international assistance locating qualified medical care?</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Provides international assistance for emergency medical evacuation?</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Provides coverage in the event of a change in job status?</td>
<td>YES</td>
<td>?</td>
</tr>
<tr>
<td>Has a local office that provides customer assistance specifically for Stanford students? (Vaden Health Center’s Insurance and Referral Office has staff to help with enrollment, to provide customer service when questions or problems arise, and to directly handle referrals.)</td>
<td>YES</td>
<td>?</td>
</tr>
</tbody>
</table>

If you are considering retaining your own insurance AND that insurance is Medicaid, Medi-Cal, an HMO, or another limited network plan, we strongly encourage you to contact Vaden’s Insurance Office prior to making a decision to waive Cardinal Care.
Retaining Cardinal Care Coverage

If you decide you want to retain health insurance coverage through Cardinal Care, you must acknowledge your understanding that coverage will remain in effect through the academic year in Axess by the applicable deadline. The decision made at the start of the first registered quarter of each academic year (Autumn quarter for most students) is binding for the remainder of that academic year. This means that if you choose to be in Cardinal Care, you will not be able to leave the plan until the end of the plan year (August 31). The process for retaining Cardinal Care coverage is the same for domestic and international students.

For All Students Who Want To Remain Enrolled In Cardinal Care:

Go to axess.stanford.edu and follow the instructions to acknowledge enrollment. You will need your SUNet ID and password to access the acknowledgment screen in Axess.

Deadline to Acknowledge Cardinal Care Coverage in Axess:

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Deadline</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn</td>
<td>September 15</td>
<td>for students entering Stanford in Autumn (Axess opens August 1 for Autumn)</td>
</tr>
<tr>
<td>Winter</td>
<td>December 15</td>
<td>for students entering Stanford in Winter (Axess opens October 23 for Winter)</td>
</tr>
<tr>
<td>Spring</td>
<td>March 15</td>
<td>for students entering Stanford in Spring (Axess opens February 5 for Spring)</td>
</tr>
<tr>
<td>Summer</td>
<td>June 15</td>
<td>for students entering Stanford in Summer (Axess opens April 9 for Summer)</td>
</tr>
</tbody>
</table>
Waiving Cardinal Care Coverage

Once you’ve evaluated your options, you may decide that you do not wish to remain enrolled in Cardinal Care. The process for waiving Cardinal Care coverage differs for domestic vs. international students.

### Waiving Cardinal Care Coverage—For Domestic Students

If you are a domestic student, in order to waive Cardinal Care coverage, the alternative coverage you select must offer benefits comparable to those provided under Cardinal Care. Especially important are the following:

- The alternative plan must cover the entire academic year (students may not have gaps in coverage)
- The alternative plan must cover inpatient and outpatient medical care in the San Francisco Bay Area
- The alternative plan must cover inpatient and outpatient mental health care in the San Francisco Bay Area

Review your policy carefully before deciding to waive. Waiving coverage means that you will not be eligible to have insurance through Cardinal Care for the remainder of the academic year.

**Domestic Student Deadline to Waive Cardinal Care Coverage in Axess:**

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Deadline</th>
<th>For students entering Stanford in Quarter</th>
<th>Axess opens...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn Quarter</td>
<td>September 15</td>
<td>for students entering Stanford in Autumn</td>
<td>(Axess opens August 1 for Autumn quarter)</td>
</tr>
<tr>
<td>Winter Quarter</td>
<td>December 15</td>
<td>for students entering Stanford in Winter</td>
<td>(Axess opens October 23 for Winter quarter)</td>
</tr>
<tr>
<td>Spring Quarter</td>
<td>March 15</td>
<td>for students entering Stanford in Spring</td>
<td>(Axess opens February 5 for Spring quarter)</td>
</tr>
<tr>
<td>Summer Quarter</td>
<td>June 15</td>
<td>for students entering Stanford in Summer</td>
<td>(Axess opens April 9 for Summer quarter)</td>
</tr>
</tbody>
</table>

Please note:

- The waiver must be completed by the applicable waiver deadline.
- The waiver of coverage applies to the entire academic year. You will not be eligible to have insurance through the Cardinal Care plan for the remainder of the academic year unless you have a pre-defined qualifying life event.
- You’ll need to provide your alternative health insurance plan’s name, group policy number, and phone number in order to complete the waiver.

Once you’ve decided to waive, you must do so by the deadline that is applicable to you (see table at the right). In order to waive, you must document comparable health insurance coverage in Axess by the applicable deadline. The waiver screens are located at [axess.stanford.edu](http://axess.stanford.edu). For students entering in Autumn, for example, Axess opens on August 1 and the deadline to complete the waiver is September 15.

**For DOMESTIC students who want to waive Cardinal Care coverage:** Go to [axess.stanford.edu](http://axess.stanford.edu) and follow the instructions to waive. You will need your SUNet ID and password to access the waiver screen in Axess. You will also need information about your alternative coverage including the health plan name, group policy number, and phone number.

Please note that the waiver is only applicable for one academic year and must be repeated in any subsequent year for which you choose not to be enrolled in Cardinal Care.
Waiving Cardinal Care Coverage—For International Students

If you are an international student, you must have coverage that meets or exceeds minimum standards established by the university in order to request an exemption from Cardinal Care coverage. These requirements for coverage are in place to ensure that any non-U.S. based plan you have will serve your health care needs adequately while you are a student at Stanford.

Your alternative insurance policy must cover the entire academic period of September 1 through August 31 with benefits that meet or exceed the following minimum standards:

- An annual deductible less than $1,000 USD
- Lifetime aggregate maximum benefit of at least $2,000,000 USD OR a maximum per condition/per lifetime benefit of $500,000 USD
- Coverage for inpatient and outpatient medical care in the San Francisco Bay Area and the U.S.
- Coverage for inpatient and outpatient mental health care in the San Francisco Bay Area and the U.S.
- Prescription drug coverage
- Coverage for non-emergency as well as emergency care
- Coverage for pre-existing conditions or you have met applicable waiting periods

Although not a requirement of Stanford University, the U.S. Department of State requires that J1 visa holders have an insurance policy with minimum coverage of $25,000 USD for repatriation of remains and $50,000 USD for medical evacuation.

Review your policy carefully before deciding to request an exemption from Cardinal Care coverage. An exemption from coverage means that you will not be eligible to have insurance through Cardinal Care for the remainder of the academic year unless you have a pre-defined qualifying life event.

The decision made at the start of the first registered quarter of each academic year (autumn quarter for most students) is binding for the remainder of that academic year.

Once you’ve decided to request an exemption, you must do so by the deadline that is applicable to you (see table at the right). In order to request an exemption from Cardinal Care coverage, you must work with your insurance company to complete the International Student Insurance Coverage Certification Form, found in the back of this brochure, or online at vaden.stanford.edu.

For INTERNATIONAL students who want an exemption from Cardinal Care coverage: Find the International Student Insurance Coverage Certification Form in the back of this brochure or on the Vaden Health Center website at vaden.stanford.edu. Work with your insurance company to complete the form. Submit your completed form to Vaden Health Center’s insurance and Referral Office no later than the applicable deadline.

Fax: 650-725-9970

Submit a HelpSU ticket: helpsu.stanford.edu:
1. Select ‘Student Services’
2. Select ‘Health Insurance’
3. Attach your form or enter your question

Postal Mail: Vaden Health Center
Attn: Insurance and Referral Office
866 Campus Drive
Stanford, CA 94305-8580

If you choose not to participate in Cardinal Care, you’ll need to request an exemption from coverage each academic year by the applicable deadline. The deadlines for submission are earlier than the domestic student waiver deadlines to allow for adequate processing time. If you do not submit your form by the applicable deadline, and there is not enough time for processing, your request for exemption may be denied.

International Student Deadline to Submit the International Student Insurance Coverage Certification Form:

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Deadline</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn Quarter</td>
<td>August 15</td>
<td>for students entering Stanford in Autumn</td>
</tr>
<tr>
<td>Winter Quarter</td>
<td>November 15</td>
<td>for students entering Stanford in Winter</td>
</tr>
<tr>
<td>Spring Quarter</td>
<td>February 15</td>
<td>for students entering Stanford in Spring</td>
</tr>
<tr>
<td>Summer Quarter</td>
<td>May 15</td>
<td>for students entering Stanford in Summer</td>
</tr>
</tbody>
</table>

Once you submit the International Student Insurance Coverage Certification Form, the Vaden Health Center Insurance and Referral Office staff will review your request.

- If the staff determines that your alternative insurance policy meets the minimum standards for coverage, they will process a waiver in Axess to remove you from Cardinal Care.
- If the staff determines that your insurance policy does not meet the required minimum standards, a waiver will not be processed. The staff will assist you with determining why your coverage does not meet the requirements. You may opt to take additional action based on the identified gaps, but if you do not, you will remain enrolled in Cardinal Care for the remainder of the academic year.

In either scenario, you will receive an email notification within 10 business days of your submission with the status of your request.
Cardinal Care Coverage When You Leave the University

Cardinal Care is a full year plan—that is, if you are returning to Stanford in the Autumn quarter (and do not take steps to opt out of Cardinal Care by the applicable deadline) you’ll have coverage for the entire year and be charged accordingly. Similarly, if you enter Stanford in other quarters (and do not take steps to opt out of Cardinal Care by the applicable deadline) you’ll have coverage for the remainder of the academic year and be charged accordingly.

The one exception to this rule applies to students who graduate at the end of Autumn or Winter quarter. Students who plan to end their relationship with the University, through conferral of a terminal degree at the end of Autumn or Winter quarter, may request to be taken off the plan at the end of the corresponding Cardinal Care coverage period; December 31 for Autumn graduates and April 30 for Winter graduates. To initiate a request, you must complete the Petition for Early Cancellation of Cardinal Care Health Insurance form, found on the Vaden Health Center website at vaden.stanford.edu, and submit it to Vaden Health Center’s Insurance and Referral Office by the applicable deadline; December 15 for Autumn graduates and April 15 for Winter graduates.

Students who graduate at the end of Spring do not have the option to leave the plan and coverage remains in effect through August 31.

### 2016–2017 Cardinal Care Cost and Coverage Options Based on Quarter of Graduation

<table>
<thead>
<tr>
<th>Quarter of Graduation</th>
<th>Cardinal Care Coverage Period</th>
<th>Months of Coverage</th>
<th>Total Cost</th>
<th>Autumn</th>
<th>Winter</th>
<th>Spring</th>
<th>Summer</th>
<th>Petition Deadline*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn</td>
<td>Sep 1 – Dec 31</td>
<td>4</td>
<td>$1,656</td>
<td></td>
<td>$1,656</td>
<td></td>
<td></td>
<td>Petition must be received by Dec 15—no exceptions.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Maximum grad subsidy $828</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Winter</td>
<td>Sep 1 – Apr 30</td>
<td>8</td>
<td>$3,312</td>
<td>$1,656</td>
<td>$1,656</td>
<td></td>
<td></td>
<td>Petition must be received by April 15—no exceptions.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Maximum grad subsidy $828</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spring or Summer (same as annual)</td>
<td>Sep 1 – Aug 31</td>
<td>12</td>
<td>$4,968</td>
<td>$1,656</td>
<td>$1,656</td>
<td>$1,656</td>
<td>$0</td>
<td>There is no option to exit the plan early for Spring or Summer graduates.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Maximum grad subsidy $828</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Submit Petition for Early Cancellation of Cardinal Care Health Insurance to Vaden’s Insurance and Referral Office
Cardinal Care Coverage and Leaves of Absence

If you are covered by Cardinal Care and contemplate taking a leave of absence at any point in your academic career, be sure to contact Vaden’s Insurance and Referral Office for guidance about coverage, in advance, if possible. As you’ll see below, timing can be a driver as to whether coverage will be preserved.

A student who is granted a Leave of Absence in Autumn for which the effective date of the leave is prior to the first day of class will not be charged tuition or any associated fees for the quarter. Upon reversal of the tuition, the student’s eligibility for enrollment in Cardinal Care will be canceled retroactive to September 1. (The student’s eligibility for enrollment in Cardinal Care will resume when s/he returns and tuition is reinstated.)

A student who is granted a Leave of Absence in Autumn for which the effective date of the leave is on or after the first day of class but before the term withdrawal deadline will be charged (prorated) tuition and associated fees for the quarter. If enrolled in Cardinal Care, the student will remain enrolled through the end of the plan year (August 31) and applicable fees will apply.

A student who is enrolled in Cardinal Care as of Autumn quarter, and who is granted a Leave of Absence for a subsequent quarter (i.e., Winter, Spring, or Summer) will remain enrolled in and covered by Cardinal Care through the end of the plan year (August 31) and applicable fees will apply.

A student who returns to the university in Winter or Spring, and who is subsequently granted a Leave of Absence for the entry quarter, will be subject to the same guiding principles as a student who enters in Autumn, i.e., if the effective date of the leave is prior to the first day of class, tuition and any associated fees for the quarter will be reversed. Upon reversal of the tuition, the student’s eligibility for enrollment in Cardinal Care will be canceled retroactive to the start of the applicable coverage period (December 1 for Winter entry students and April 1 for Spring entry students). If the effective date of the leave is on or after the first day of class but before the respective term withdrawal deadline, the student will be charged (prorated) tuition and associated fees for the quarter. If enrolled in Cardinal Care, the student will remain enrolled through the end of the plan year (August 31) and applicable fees will apply.
Which Do I Use?  
Health Fee vs. Health Insurance

For students who are assessed the Health Fee, it makes the most sense for Vaden Health Center to be your first stop for primary care medical visits, counseling services, and health and wellness programs. Students who have insurance coverage through Cardinal Care will want to coordinate specialty care through Vaden Health Center to realize maximum (i.e., Tier 1) benefits at Stanford University Medical Center and Menlo Medical Clinic. Students with private insurance should seek insurance-covered care according to the terms of their plan. The chart below helps to describe the relationships of these resources.

<table>
<thead>
<tr>
<th>Services available at Vaden Health Center and covered under the Health Fee</th>
<th>Services available at Vaden Health Center but not covered under the Health Fee</th>
<th>Cardinal Care/private health insurance plans cover:</th>
</tr>
</thead>
</table>
| Primary Care medical services including:  
  - Medical appointments during weekday hours  
  - Urgently needed care during weekend and evening hours  
  - 24-hour telephone medical advice for urgent conditions  
  - Confidential web-based messaging to a student’s clinician  
  - Web-based booking of weekday appointments  | Many of the following services are covered by health insurance:  
  - Pharmacy prescriptions and other medications  
  - Physical Therapy treatment  
  - Travel Clinic visits and travel-related vaccinations  
  - Allergy, Immunization, and Injection Clinic services  
  - Immunizations/tests to meet Stanford’s entrance Health Requirements  
  - Physical exams and associated lab tests or x-rays for employment, special programs, or other purposes  
  - Medical specialty care (e.g., Dermatology)  |  
  - Specialty care  
  - Outpatient care  
  - Inpatient care/hospitalization  
  - Emergency care  
  - Medical care while away from campus (e.g., during travel)  
  - Diagnostic testing performed outside Vaden Health Center (MRI, CT Scan)  |
| Counseling and Psychological services including:  
  - Psychological evaluation and short-term therapy:  
  - Initial psychiatric medication evaluation  
  - 24-hour crisis services  | Counseling and Psychological services including:  
  - Long term therapy  
  - Psychiatric medication management  |  
  - Inpatient treatment in a hospital or residential facility  |
| Wellness and Health Promotion services including:  
  - Nutrition counseling and education  
  - Sexual health and relationship consultation and education  
  - Peer health education programs and services  
  - Health and wellness programs and events  |  | Some services that are covered by insurance, such as pharmacy, physical therapy, and preventive immunizations, are offered on site at Vaden Health Center for your convenience. Others are available at Stanford University Medical Center, or through other contracted providers in the local community and nationally.  
  - Some of these services have fees or cost share associated with them when performed at Vaden Health Center and may require payment at the time of service.  |
The Confidential Support Team (CST)

Located in Rogers House, CST offers confidential support to Stanford students impacted by sexual assault and relationship violence, including: domestic abuse, intimate partner abuse, stalking, and sexual or gender-based harassment. CST services include brief emotional support and ongoing individual counseling. The CST also provides information about rights and reporting options, as well as support throughout the reporting process if pursued. Appointments are intended to provide confidential support for students who have experienced sexual/relationship violence as well as for those who have questions about how to help a survivor of sexual/relationship violence. The CST is staffed by licensed psychologists and licensed clinical social workers. There is no charge for Stanford students.
Health Insurance For Dependents

Stanford University offers the Stanford Student Dependent Health Insurance Plan (Dependent Plan) for our students’ dependents. It’s available to dependents of any Stanford student who is enrolled in Cardinal Care.

The Dependent Plan is a PPO plan (separate from Cardinal Care), and is also administered by Health Net of California. The policy year is September 1 through August 31. Eligible dependents include:

- Spouse (unless you are legally separated or divorced)
- Same-sex domestic partner (as long as both partners are age 18 or older and neither partner is married to anyone else)
- Unmarried children up to age 26
- Unmarried children 26 or older who are unable to support themselves because of a physical or mental handicap that occurred before age 26

Please refer to the Stanford Student Dependent Health Insurance Plan brochure on the Vaden Health Center website for highlights of the plan. Greater detail about benefits is available in the Dependent Plan’s Summary of Benefits and Coverage (SBC) located at www.healthnet.com/cardinalcare. You may also contact Health Net directly at (800) 250-5226 with questions.
DEPENDENT PLAN
OPEN ENROLLMENT GUIDELINES

You may enroll dependents in the Dependent Plan only if you’re enrolled in Cardinal Care and only when you first matriculate at Stanford. This is the one and only time during your entire academic career at Stanford when you can purchase the plan for your dependents unless a qualifying life event occurs.

Open enrollment timelines, based on the first quarter of matriculation for a new student, are displayed in the following table:

<table>
<thead>
<tr>
<th>If your first quarter is:</th>
<th>Open enrollment period for your dependents is:</th>
<th>The Dependent Plan coverage effective date is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn</td>
<td>September 1 – September 30</td>
<td>September 1 or October 1, based on date of enrollment</td>
</tr>
<tr>
<td>Winter</td>
<td>January 1 – January 30</td>
<td>January 1 or February 1, based on date of enrollment</td>
</tr>
<tr>
<td>Spring</td>
<td>April 1 – April 30</td>
<td>April 1 or May 1, based on date of enrollment</td>
</tr>
<tr>
<td>Summer</td>
<td>June 1 – June 30</td>
<td>June 1 or July 1, based on date of enrollment</td>
</tr>
</tbody>
</table>

How To Enroll Your Dependents
If you are a student who is enrolled in Cardinal Care, you may enroll your dependent(s) in the Dependent Health Insurance Plan by completing the enrollment application located at vaden.stanford.edu. The completed form should be submitted to Vaden Health Center’s Insurance and Referral Office. Once enrolled, all billing and payment occurs directly through Health Net.

Cost and Billing
Enrollees in the Dependent Plan pay the premium directly to Health Net of California on a monthly basis. For the 2016–2017 plan year, the monthly premium charges for dependents are:

<table>
<thead>
<tr>
<th>Type of Plan</th>
<th>Monthly Premium for the 2016–2017 Plan Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse/Domestic Partner</td>
<td>$382.71</td>
</tr>
<tr>
<td>Child</td>
<td>$195.48</td>
</tr>
<tr>
<td>Children (2 or more)</td>
<td>$349.35</td>
</tr>
<tr>
<td>Spouse/Domestic Partner + Child</td>
<td>$578.19</td>
</tr>
<tr>
<td>Spouse/Domestic Partner + Children</td>
<td>$732.16</td>
</tr>
</tbody>
</table>

Qualifying Life Events
Once the open enrollment period has expired, the only other time you can purchase coverage through the Dependent Plan is when a ‘qualifying life event’ takes place. Examples of qualifying life events are:

- Marriage
- Birth of a child or children
- Loss of prior coverage

Enrollment must occur within 30 days of the qualifying event. Submission of proof associated with the qualifying event is required. Contact Vaden Health Center’s Insurance and Referral Office staff for more information.

Seeking Care
To maximize the benefits under the Dependent Plan, dependents should utilize a Health Net contracted provider when seeking care. The use of non-contracted providers is also an option on this plan, but such care will have higher out-of-pocket associated costs. Adult dependents can be seen at Vaden Health Center on a fee-for-service basis, but accessing care through a Health Net contracted provider makes more sense in terms of cost.

Dropping Enrollment in the Dependent Plan
Your dependent(s) may choose to drop Dependent Plan coverage at any time, but will not have the option to re-enroll unless a qualifying life event occurs.
Frequently Asked Questions
You Might Be Wondering…

We have included some of the more common queries we receive and our answers here, but if you don’t see yours addressed, please visit the Vaden Health Center website at vaden.stanford.edu or contact us directly. A full listing of contact information is included on the back inside page of this brochure.

Can I request an exemption from paying the Health Fee?
The Health Fee is mandatory for all students who are enrolled on the main Stanford campus. However, an exemption may be requested, using HelpSU (https://helpsu.stanford.edu/helpsu/3.0/auth/helpsu?pcat=chsfexemption&dtemplate=SSCcampphealthexempt), by any student who is living outside of the Bay Area for the entire quarter and who therefore cannot reasonably access care at Vaden Health Center. The Bay Area is defined as Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano, and Sonoma counties.

What if I study abroad, or at Bing Stanford in Washington, or at Hopkins Marine Station?
While you are enrolled at another Stanford campus, such as through the Bing Overseas Studies Program, Bing Stanford in Washington, or Hopkins Marine Station, you won’t be charged the Health Fee, even though you may be paying other Stanford fees, such as tuition. If you want or need to have care at Vaden, you may opt to pay the fee to be seen.

Are there any university resources to help me pay the Health Fee?
If you are a student that needs help with paying the Health Fee, Stanford has options for you. Please see below:

- Some students may qualify for aid with university fees if they pose significant hardship. If applicable to you, the best thing to do is to review the information about your specific situation at financialaid.stanford.edu and then contact the Financial Aid Office directly at (650) 723-3058 for further assistance.

- Graduate students with funding from a program, department, or fellowship may be eligible for support. Be sure to consult with your department’s student services administrator.

If I don’t register for classes in Summer quarter but will be in the area, can I access care at Vaden Health Center?
If you are unregistered for classes in Summer quarter, you will not be automatically charged the Health Fee. If you want to be seen at Vaden Health Center, one of the following scenarios will apply:

- If you have Cardinal Care, and want to have care at Vaden Health Center, you’ll be charged the Health Fee at the time of your visit.

- If you have private insurance, and want to have care at Vaden Health Center, you’ll be charged a Summer Access Fee (same amount as the Health Fee) at the time of your visit.

I am a student with dependent(s). Can dependents access care at Vaden Health Center?
Dependents of students are not charged the Health Fee. Adult dependents may be seen at Vaden Health Center and will be charged fee-for-service at the time of the visit; however, adult dependents who have insurance through the Stanford Student Dependent Health Insurance Plan should access care through a networked provider to minimize out-of-pocket costs.

I have my own private insurance plan. Will Vaden Health Center bill my private insurance for primary medical care visits?
No. Vaden Health Center does not bill private insurance carriers for primary care visits, psychological evaluations and short-term therapy, or for the health and wellness programs that are covered under the Health Fee.

I intend to keep Cardinal Care coverage and know I will be traveling away from campus over the year. If I am out of the area and need care, what do I do?
Within California, you can go to any Health Net contracted provider under Tier 2 of the plan. If you are outside of California, the provider network is First Health. To find a Health Net or First Health contracted provider in your area, visit www.healthnet.com/cardinalcare or call Health Net Customer Service at (800)-250-5226.

What if I need insurance coverage before 9/1?
The university offers a month of Early Start coverage in Cardinal Care for students who must arrive early on campus in August for official university business. Early Start is only available to students who will have Cardinal Care coverage for the upcoming academic year. If you are qualified, please contact the Vaden Insurance and Referral Office for additional information.

Does Cardinal Care include vision benefits?
Cardinal Care covers one annual eye examination. Cardinal Care enrollees can schedule this exam directly with a Health Net PPO provider and pay only a $30 copay. See a list of Health Net PPO providers within three miles of campus at vaden.stanford.edu

You may also visit the Vaden Health Center website for a list of local opticians, optometrists, and ophthalmologists who extend discounts to Stanford students.
## International Student Health Insurance Coverage Certification Form

To request an exception to the mandatory purchase of Cardinal Care, this form must be completed on an annual basis and submitted to Vaden Health Center’s Insurance Office.

### Submit Via Postal Mail or Delivery Service, or Deliver in Person, To:

- **Vaden Health Center**  
  Insurance Office  
  866 Campus Drive  
  Stanford, CA 94305

### Fax To:

- (650) 725-9970

### Submit Via HelpSU:

helpsu.stanford.edu  
1. Select ‘Student Services’  
2. Select ‘Health Insurance’  
3. Attach your form or enter your question

<table>
<thead>
<tr>
<th>STUDENT LAST NAME</th>
<th>STUDENT FIRST NAME</th>
<th>STANFORD UNIVERSITY I.D. NUMBER</th>
<th>APPOINTMENT START AND END DATES</th>
</tr>
</thead>
</table>

I certify that the above-named individual has insurance coverage for the period of ______________ through ______________ which meets or exceeds the following:

1. **Annual deductible less than $1,000 USD**  
   (If a foreign currency applies, please indicate the applicable amount.)
   - [ ] Yes  
   - [ ] No

2. **Lifetime benefit** (complete a or b):
   a. **Lifetime aggregate maximum benefits of at least $2,000,000 USD**  
      (If a foreign currency applies, please indicate the applicable amount.)
   - [ ] Yes  
   - [ ] No
   b. **Maximum per condition/per lifetime benefit of at least $500,000 USD**  
      (If a foreign currency applies, please indicate the applicable amount.)
   - [ ] Yes  
   - [ ] No

3. **Covers inpatient and outpatient medical care in the San Francisco Bay Area in the U.S.**
   - [ ] Yes  
   - [ ] No

4. **Covers inpatient and outpatient mental health care in the San Francisco Bay Area in the U.S.**
   - [ ] Yes  
   - [ ] No

5. **Covers prescriptions**
   - [ ] Yes  
   - [ ] No

6. **Covers non-emergency as well as emergency care**
   - [ ] Yes  
   - [ ] No

7. **Pre-existing conditions** (complete a or b):
   a. **Policy covers pre-existing conditions**
   - [ ] Yes  
   - [ ] No
   b. **The insured individual has met applicable waiting periods**
   - [ ] Yes  
   - [ ] No

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Although not a requirement of Stanford University, the U.S. Department of State requires that J1 visa holders have an insurance policy with minimum coverage of $25,000 USD for repatriation of remains and $50,000 USD for medical evacuation.

<table>
<thead>
<tr>
<th>NAME OF INSURANCE COMPANY</th>
<th>INSURANCE POLICY NUMBER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>AGENT REPRESENTING INSURANCE COMPANY</th>
<th>SIGNATURE OF AGENT</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>TELEPHONE NUMBER</td>
<td>ADDRESS</td>
<td></td>
</tr>
</tbody>
</table>

I have enrolled in the above insurance program and verify that the information contained herein is true and accurate. I will maintain this coverage for the period listed and will inform Vaden Health Center’s Insurance Office of all changes.

<table>
<thead>
<tr>
<th>SIGNATURE OF STUDENT</th>
<th>DATE</th>
</tr>
</thead>
</table>

4.2016
# Contact Vaden Health Center

Website: [vaden.stanford.edu](http://vaden.stanford.edu)

Main Phone: **(650) 498-2336**

Ext. 1 Medical Services

Ext. 2 Counseling and Psychological Services (CAPS)

Ext. 3 Pharmacy

Ext. 4 Health Insurance and Referral Office

Ext. 5 Wellness and Health Promotion Services

Ext. 6 Vaden Health Center

Hours of Operation

### Administration
- T: (650) 725-1364
- Fax: (650) 723-4999

### Counseling and Psychological Services (CAPS)
- T: (650) 723-3785
- Fax: (650) 725-2887

### Medical Records
- T: (650) 725-6979
- Fax: (650) 498-1118

Use Fax only for Health Requirements form submissions

Email: vaden-emr@stanford.edu

Use email for Health Requirements questions or form submissions

### Confidential Support Team (CST)
- T: (office) (650) 736-6933
- Hotline: (650) 725-9955

### MORE Physical Therapy, Inc.
at Vaden Health Center
- T: (650) 723-3195
- Fax: (650) 723-8035

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We encourage feedback and want to hear how we can improve our services. Use the suggestion box located in Vaden Health Center’s lobby, anonymously if preferred, or email us at [vaden-feedback@stanford.edu](mailto:vaden-feedback@stanford.edu).

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## Cardinal Care Resources

<table>
<thead>
<tr>
<th>Type of Information</th>
<th>Resource</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical benefits including Summary of Benefits and Coverage (SBC)</td>
<td>Health Net</td>
<td>(800) 250-5226 No-cost language assistance can be provided by calling this number. <a href="http://www.healthnet.com/cardinalcare">www.healthnet.com/cardinalcare</a></td>
</tr>
<tr>
<td>Mental health and substance use disorder benefits including Summary of Benefits and Coverage (SBC)</td>
<td>MHN</td>
<td>(800) 327-0307 No-cost language assistance can be provided by calling this number. <a href="http://www.healthnet.com/cardinalcare">www.healthnet.com/cardinalcare</a></td>
</tr>
<tr>
<td>Dental benefits including Evidence of Coverage or Summary Plan Description</td>
<td>Delta Dental of California</td>
<td>(800) 765-6003 <a href="http://www.deltadentalins.com/cardinalcare">www.deltadentalins.com/cardinalcare</a></td>
</tr>
<tr>
<td>Cardinal Care enrollment and plan details</td>
<td>Vaden Insurance and Referral Office</td>
<td>(650) 723-2135 <a href="http://vaden.stanford.edu/insurance">vaden.stanford.edu/insurance</a></td>
</tr>
</tbody>
</table>
## GET HELP FOR...

### NON-URGENT HEALTH CONCERNS

**Examples**
- Cold, sore throat
- Allergy
- Sprain
- Bruises/abrasions (scraps)
- Minor burns
- Insomnia

### URGENT HEALTH CONCERNS

**Examples**
- Laceration (a cut requiring stitches)
- Fever > 101°F (38.3°C) or lasting 2+ days
- Injury with significant pain
- Panic attack
- Moderate to severe depression

### MEDICAL EMERGENCIES

**Examples**
- Difficulty breathing
- Massive bleeding
- Major injury
- Unconsciousness or unresponsiveness (e.g., drug or alcohol overdose)
- Severe allergic reaction
- Threat of harm to self or others

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## WHAT TO DO

- **Call Vaden Health Center at (650) 498-2336** to schedule an appointment or schedule online at [VadenPatient.stanford.edu](http://VadenPatient.stanford.edu)

**WHAT TO DO**

- **If you need care more urgently**, call us in advance to tell us you are coming in. Our staff will evaluate your need and assist you with getting the appropriate level of care.

**WHERE TO GO**

- Vaden Health Center
  - 866 Campus Drive
  - Stanford, CA 94305-8580

**WHERE TO GO**

- The ambulance will take you to a nearby hospital.

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## WHEN VADEN HEALTH CENTER IS CLOSED

Visit [vaden.stanford.edu](http://vaden.stanford.edu) for a complete listing of Vaden Health Center's hours of operation.

When Vaden Health Center is closed (such as outside of clinic hours, during some school breaks, or on certain holidays), and you need care, a number of local options exist. The severity of your condition may drive which option best fits your needs.

### STANFORD EXPRESS CARE

- Stanford Express Care offers primary care services for non-urgent situations. The clinic is located in the Hoover Pavilion at 211 Quarry Road, Suite 202 (close to Stanford Shopping Center) and has extended evening and weekend hours. Same day appointments are offered.

  More information is available at [stanfordhealthcare.org/medical-clinics/express-care.html](http://stanfordhealthcare.org/medical-clinics/express-care.html) or at (650) 736-5211.

  You will need to present your insurance card at the time of service.

### PALO ALTO URGENT CARE AT THE PALO ALTO MEDICAL FOUNDATION

- Palo Alto Urgent Care offers urgent care services for situations that are more medically acute. The facility is located at 795 El Camino Real in the Palo Alto Medical Foundation complex and has extended morning, evening and weekend hours.


  You will need to present your insurance card at the time of service.

### STANFORD’S EMERGENCY DEPARTMENT

- Located in Stanford Hospital, the Emergency Department is open 24 hours per day, 7 days per week for medical emergencies. The emergency entrance to the hospital is located at 900 Quarry Rd.

  More information is available at [stanfordhealthcare.org/medical-clinics/emergency-department.html](http://stanfordhealthcare.org/medical-clinics/emergency-department.html) or at (650) 723-5111.

  You will need to present your insurance card at the time of service.

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If you aren’t sure what to do and need to speak with a provider urgently, Vaden Health Center has clinicians on call 24 hours per day. Contact us at (650) 498-2336 and select the appropriate option. If we are closed when you call, our answering service will connect you with a provider who can assist you.