WELCOME ABOARD PACKAGE

**In order to get timely treatment you should consider taking your picture ID, home address, phone no, FIN# (9#) and you’re ITO with you to the Medical Facility.**

MILITARY MEDICAL FACILITY

* PRESIDIO OF MONTEREY ARMY HEALTH CLINIC

(Appointment based services)

473 Cabrillo Street, Bldg. 422, Presidio of Monterey Appointment Line: 866-957-2256

(Mon – Fri 0700-1600)

(Third Thursday of the Month 0700-1030)

Clinic will be closed on Federal Holidays and Training Holidays.

* For active duty military all non-emergency after-hour care must be coordinated with the Nurse Advise Line by dialing (800) 874-2273 Option 1
* The Army Health Clinic at DLI does not see civilian students. Civilian students will need to seek medical treatment with a civilian physician according to your insurance coverage.

**If you receive a referral from the MTF to a civilian doctor or if you went to an Emergency Room or Urgent Care Center, Please contact Jalpa Zambrano Health Benefits Advisor at 831-656-2416 email:** [**jalpa.j.zambrano.civ@mail.mil**](mailto:jalpa.j.zambrano.civ@mail.mil) **or** [**jjzambra@nps.edu**](mailto:jjzambra@nps.edu)

CIVILIAN MEDICAL SERVICES

For emergency care (threat to life, limb, eyesight), members should go to the closest available Emergency Room, which for the Monterey Peninsula is the Community Hospital of the Monterey Peninsula (CHOMP) or dial 911

**LISTED BELOW ARE THE RECOMMENDED CIVILIAN HOSPITALS IN THE MONTEREY AREA**

(For emergency care walk in services are available)

* **COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA (CHOMP)** 23625 Holman Highway, Monterey, 831-624-5311
* **NATIVIDAD MEDICAL CENTER** 1441 Constitution Blvd, Salinas, 831-755-4111/ 831-755-6268
* **SALINAS VALLEY MEMORIAL** 450 East Romie Lane, Salinas, 831-372-7844/ 831-757-4333

**LISTED BELOW ARE THE URGENT CARE FACILITIES AVAILABLE IN MONTEREY AREA**

(Walk in services)

* **DOCTORS ON DUTY** – no appointments needed

501 Lighthouse Ave, Monterey, 831-649-0770 (Mon-Fri 0800-2000 / Sat & Sun 0800-1800)

1513 Fremont St, Seaside, 831-899-1910 (Mon-Fri 0800-1800 Sat 0800-1500)

Average office visit $242-$382 depending on service

* **MONTEREY BAY URGENT CARE** – no appointments needed

245 Washington St. Monterey, 831-372-2273 (press 0 to speak to the receptionist)

(Mon-Fri 0730-1800)(Sat/Sun 0900-1700)

Average office visit $150 and up

**PRIMARY CARE**

* Presidio of Monterey Army Medical Clinic is available for all active duty military
* Presidio of Monterey Pediatric Clinic is available based on your insurance guideline, 880 Cass Street Suite # 209, Monterey , 866-957-2256

(Mon- Fri 0800-1630), Close for lunch 1230-1330

(Third Thursday of the Month 0800-1030)

* Other civilian providers in the local area specified by your insurance

**MINIMUM REQUIREMENTS FOR MEDICAL INSURANCE**

* Medical Benefits of at least $400,000 per year, per person. Duration of policy must be for minimum of one year or remainder of time left at NPS whichever is less.
* Annual deductible not to exceed $1000 per family.
* Repatriation of remains in the amount of $50,000 per person, should a death occur in the U.S. Note: This would provide for the preparation and transportation of remains to home country.
* Medical evacuation in the amount of $250,000 per person for immediate transportation to the nearest adequate medical facility, and subsequently in the event it is determined to be medically necessary for IMS, international civilian students, and/or authorized dependents to return to their home country.
* Policies must be payable in US dollars not foreign currency that, due to exchange rates, could be in lesser amounts when converted into dollars.
* Insurance must pay benefits to the Department of Defense Medical Facility if appropriate.
* Health insurance policy must be in English and be recognized as an international company and have a POC in the United States.

**MINIMUM REQUIREMENTS FOR PREGNANCY INSURANCE**

**Foreign military/ foreign civilian and their family members are qualified for pregnancy insurance coverage within 60 days of arrival to the United States or during the open enrollment period usually November 15 – February 15.**

* Pregnancy insurance must include coverage of pre and post natal care, as well as delivery, of at least $250,000 (this is in addition to the $400,000 minimum coverage for basic medical insurance).
* If medical costs are paid by your country, country will be notified of impending pregnancy through official channels.
* Unless ITO specifically states foreign government or FMS case will pay all costs related to that pregnancy and delivery, spouses who are pregnant prior to departure for Monterey must present proof of complete pregnancy coverage prior to being authorized as an accompanying dependent on the ITO.
* International students and their dependents while attending NPS are **not** authorized to participate in us federal or state medical/dental programs **(this includes, but is not limited to: AIM, Medicaid, MediCal** **and other Federal/State programs).**

**If there are any outliers to this specification please contact Jalpa Zambrano.**

**WHAT QUESTIONS TO ASK WHEN BUYING A MEDICAL INSURANCE**

1. What does the policy cover, such as: immunizations, routine annual checkup, routine pediatric checkup, Prescription drugs?
2. How much is my copay for doctor’s visit (outpatient clinic), emergency room and urgent care?
3. How much is my individual and family deductible?
4. What is my coinsurance for outpatient clinic, emergency room and urgent care?
5. What is my coverage for inpatient services? (admission in hospital)
6. What is my coverage for out of network providers?
7. Can I get List of in network providers/doctors in the area? (primary care, women’s health (OB-GYN), pediatricians if needed; call those providers from the list to see if they truly taking that insurance)
8. Are pre-existing conditions covered?
9. How much is my monthly premium?

**DEFINITIONS**

**MTF:** Military Treatment Facility

**MONTHLY PREMIUM:** How much you pay monthly to have health insurance.

**COINSURANCE:** Patient pays a portion of the claim/ bill. If the health insurance plan covers 80% of the allowed amount for an office visit, your coinsurance is 20%. For example your medical bill is $100, and if you already have paid your deductible for the year, you will need to pay the doctor $20. The health insurance plan pays the rest.

**COPAY:** Patient requires paying a small fixed/flat amount every outpatient and or inpatient visit, generally $15 or $20.

**DEDUCTIBLE:** A deductible is the amount patient pays for health care services before health insurance begins to pay. A Deductible is an annual amount. For example your deductible for the year is $100 and the doctor’s visit costs $200 you will have to pay $100 first and then your insurance would cover rest unless a coinsurance applies.

**IN-NETWORK PROVIDERS:** In-network refers to providers or health care facilities that have partnered with health plan to see their customers at a negotiated rate.

**OUT-OF-NETWORK PROVIDERS:** An out-of-network provider is one which has not contracted with your insurance company for reimbursement at a negotiated rate. Some health plans do not reimburse for out-of-network providers.

**INPATIENT SERVICES:** Medical procedure or medical care that requires admission or overnight stay at the hospital.

**OUTPATIENT SERVICES:** Medical procedure or test that can be done in a medical center without overnight stay, such as: immunizations, annual routine visit, labs, x-ray/MRI scans, etc.

**PREEXISTING CONDITION:** A medical condition existing at a time when new insurance was bought.