



FLORIDA STATE  
UNIVERSITY

Orientation 2019



UNIVERSITY HEALTH SERVICES



# FSU Health & Wellness Center: Much more than a clinical space

- Classrooms, auditorium, lounge area
- Smart device charging stations
- WiFi hot spot



Come see us!



# Healthcare transition: Dependent to Independent

- Accessing the system
  - When to schedule an appointment
  - How to schedule an appointment
    - Getting there on time
    - Referrals
  - Patient-provider communication
    - Pertinent medical history
    - Allergies
- Insurance
  - Deductibles, co-pays
  - Insurance cards
    - Medical, pharmacy
- Pharmacy and laboratory services
  - Where to go
  - Additional co-pays
- Following treatment regimen
  - Taking medications as prescribed
  - Adhering to rest/activity restrictions, etc.





# Disclosure of personal health information

- MUST have **disclosure form** signed by student
  - Exceptions
    - Minors under the age of 18
    - Life-threatening emergencies
- Student may rescind/modify disclosure form at any time
- Maintain open channel of communication with your student

  
THE FLORIDA STATE UNIVERSITY  
UNIVERSITY HEALTH SERVICES  
HEALTH & WELLNESS CENTER

University Health Services  
Florida State University  
960 Learning Way  
Tallahassee, FL 32306-4178  
(850) 644-3608  
Fax: (850) 644-8958

Student Name (Printed)       
Last First MI FSU SN Date of Birth

Patient Disclosure Authorization:

Emergency Contact Name:  Relationship to Patient:

Address:  Phone:

Do you want your treatment at University Health Services discussed with this person? Yes ☐ No ☐

The staff members of University Health Services consider all patient information confidential. Please list all individuals with whom we may discuss your medical condition, test results, and/or treatment plan. **This does not include Psychiatry.**

**YOU MAY DISCUSS MY TREATMENT AT UNIVERSITY HEALTH SERVICES WITH:**

Note: Accepted relationships include immediate family members such as, mother, father, spouse, and children. The Health Center will not honor disclosure for discussion of medical conditions, test results, and/or treatment plan to departments on campus or relationships other than those stated without proper medical release forms on file.

1.  Relationship



2.  Relationship

3.  Relationship





# Consent to treat for minors

 **FLORIDA STATE UNIVERSITY**  
**Immunization Form** 

Part A- Print or type. Illegible form will not be processed

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

EMPLID \_\_\_\_\_ EMAIL \_\_\_\_\_ PRIMARY PHONE# \_\_\_\_\_

1. Please list any relevant personal and family medical history: \_\_\_\_\_  
Do you have any allergies (including Medications): No ☐ Yes ☐ Please list if yes: \_\_\_\_\_

2. **REQUIRED AUTHORIZATIONS FOR CARE FOR STUDENTS UNDER THE AGE OF 18:** I authorize health center personnel to provide medical and surgical care including examinations, treatment, immunizations and the like for my son/daughter. In the event of serious disease or injury, I understand that all reasonable efforts will be made to contact me but failure to contact will not prevent emergency treatment if necessary to preserve life or health.  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

3. **Measles, Mumps, Rubella (Required)**  
2 doses of vaccine OR a blood test showing immunity  
Dose 1 \_\_\_\_\_ MM / DD / YR  
Dose 2 \_\_\_\_\_ MM / DD / YR

4. **\*Hepatitis B (Required or Complete Section 6)**  
3 doses of vaccine OR a blood test showing immunity  
Dose 1 \_\_\_\_\_ MM / DD / YR  
Dose 2 \_\_\_\_\_ MM / DD / YR  
Dose 3 \_\_\_\_\_ MM / DD / YR

5. **\*Meningococcal Meningitis Serogroups (Required or Complete Section 6)**  
1 dose since age 16. (such as Menactra, Menvevax, Menomune, MCV4, Menveo, and ACYW-135)  
Dose 1 \_\_\_\_\_ MM / DD / YR  
Dose 2 \_\_\_\_\_ MM / DD / YR

6. **\*Waiver information:** I have received the required information regarding the risk of acquiring Meningococcal Meningitis and Hepatitis B and the benefits of receiving immunizations to reduce those risks. I also understand that I am required to receive these immunizations or to actively decline the immunizations by checking the boxes and signing below. I understand that I may decline either or both immunizations and that declining these vaccines now does not mean I may not receive them in the future.  
☐ Meningitis Waiver ☐ Hepatitis B Waiver  
Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

7. **Meningitis B (Optional)** Please circle type of vaccine (Bexsero or Trumenba)  
Meningitis B Dose 1 \_\_\_\_\_ MM / DD / YR  
Meningitis B Dose 2 \_\_\_\_\_ MM / DD / YR  
Meningitis B Dose 3 \_\_\_\_\_ MM / DD / YR

8. **Tetanus-Diphtheria and Pertussis (Tdap) (Optional) (Required for NCAA Athletes)**  
Incoming students should have one Tdap booster at 11 years of age or older.  
Tdap \_\_\_\_\_ MM / DD / YR

9. **Tetanus-Diphtheria (Td) (Optional)**  
Td \_\_\_\_\_ MM / DD / YR

**This section to be completed by your healthcare provider**

10. **Authorization and additional comments:**  
The immunizations dates and any statement of contraindications to immunizations entered on this document are, as of the date signed, verified by my signature below. Additional comments: \_\_\_\_\_

Clinician OR Records Custodian Name \_\_\_\_\_  
Clinician OR Records Custodian Signature \_\_\_\_\_ DATE \_\_\_\_\_ OFFICE STAMP \_\_\_\_\_

Once Completed: You may submit this form to the Health Compliance Office in one of the following ways:  
Email: [healthcompliance@fsu.edu](mailto:healthcompliance@fsu.edu) Please be aware that email sent over the Internet is not considered secure. FSU shall not liable for any breach of confidentiality resulting from this form of communication.  
Fax: 850-644-8958  
Mail: 960 Learning Way, Tallahassee, FL 32306-4178  
FSU Dropbox: <https://dropbox.fsu.edu>  
In person: You may also drop off your forms in person to the Health Compliance office at UHS during regular business hours <http://uhs.fsu.edu/about/locations> at 960 Learning Way.  
Rev 2/18





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Welcome to University Health Services

# Services Offered



# Hours of Operation

- Monday through Friday
- Appointments available 8:00 AM – 4:00 PM
  - Appointment-based system
  - Call or walk in to schedule an appointment
- Staffing available until 5:00 PM





# After-hours System of Care

<http://uhs.fsu.edu/afterhours.html>



**Walk-in Clinics**  
**Urgent Care**  
**Emergency Room**

The student is responsible for verifying insurance and network benefits when presenting to a community provider.





# Pharmacy

- No onsite pharmacy
- CVS located near campus (West Pensacola St. location)
- Several nearby pharmacy options available
- Some pharmacies offer specific free and/or reduced cost medications



## Alphameds

487 E Tennessee St # 2, Tallahassee, FL 32301-7640 (850) 942-1992

## CVS

882 West Pensacola St, Tallahassee, FL 32304 (850) 841-1049

1819 West Tennessee Street, Tallahassee, FL 32304 (850) 576-0147

1708 North Monroe Street, Tallahassee, FL 32303 (850) 385-6136

1300 Apalachee Parkway, Tallahassee, FL 32301 (850) 877-5168

3035 Apalachee Parkway Tallahassee, FL 32301 (850) 402-4046

## Publix

1700 North Monroe St # 852, Tallahassee, FL 32303 (850) 222-1975

101 North Blairstone Road # 101, Tallahassee, FL 32301-2878  
(850) 219-6211

800 Ocala Road # 200, Tallahassee, FL 32304-1670 (850) 575-6997

## Target

2120 Apalachee Parkway Tallahassee, FL 32301  
(850) 671-2041

## Walgreens

2009 W Tennessee Street, Tallahassee, FL 32304 (850) 580-1899  
414 South Magnolia Drive Tallahassee, FL 32301 (850) 877-3023

## Walmart

4400 West Tennessee Street, Tallahassee, FL 32304 (850) 574-4613  
3535 Apalachee Pkwy Tallahassee, FL 32311 (850) 656-4593  
3221 N Monroe St Tallahassee, FL 32303 (850) 562-2829

Publix offers a free medication program\*

Walmart offers \$4 prescriptions\*

*\*select medications*



# 1<sup>st</sup> Floor

- Admission Health Requirements
- Triage
- Priority Clinic
- Allergy Clinic
- Medical Response Unit
- Diagnostic Imaging
- Quest Diagnostics Lab
- LabCorp





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## 2<sup>nd</sup> Floor

- Fitness and Movement Clinic
- Physical Therapy





## 3<sup>rd</sup> Floor

- Morgan Dental
- Wellness Sport & Spine







# 4<sup>th</sup> Floor

- Center for Health Advocacy & Wellness (CHAW)
- Primary Care
- Fast Track Clinic
- Travel Clinic
- Specialty Clinic
  - Allergy/Immunology
  - Neurology
  - Dermatology
  - Psychiatry







# 5<sup>th</sup> Floor

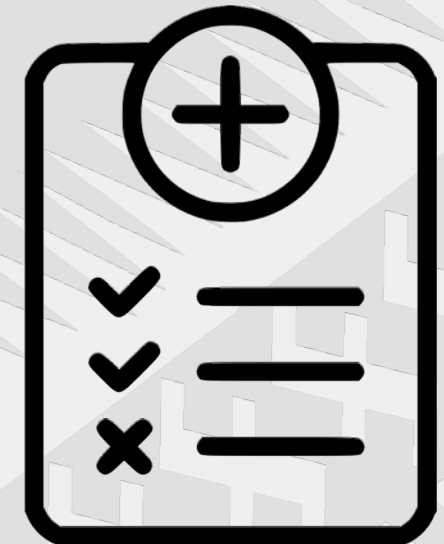
- Administrative offices
- Billing office
- Medical Records
- Women's Clinic
- Psychiatry Clinic
- Referrals Department
- Course Drops and Withdrawals





# Chronic conditions & special circumstances

- **Major life transition**
  - Relocation
  - Expanded social opportunities
  - Increased academic stress
- **Stable vs. unstable**
  - Life-work-play balance
  - Self-monitoring
  - Coping skills
- **Specialty Providers**
  - Maintain vs re-establish care
- **Context of Care**
  - Send pertinent records ahead of time
  - Treatment summary letter
- **Medic alert bracelets**
  - Anaphylaxis, Diabetes Mellitus, etc.





# Insurance & Billing

- In-network with a variety of different insurance plans
  - Out-of-network for Avmed, Tricare Prime, and Medicaid
- University-sponsored insurance available
  - United Healthcare Student Resources
  - Premium deductible through financial aid
- Insurance coverage a requirement for registration
  - Any medical insurance will meet the requirement
- PPO vs HMO
  - Bridge of care
- ER care is for true emergencies and not a substitute for primary or specialty healthcare services

The image shows a teal-colored insurance card. The front view (top) has a white medical symbol in the top left corner. It contains the following fields: "Insurance Company Name:" with a line for input, "Plan Type:" with a line, "Member Name:" with a line, "Member ID Number:" with a line, "Prescription Co-Pay:" with a line, "Generic: \$" with a line, "Office Visit Co-Pay: \$" with a line, "Name Brand: \$" with a line, and "Emergency Room Co-Pay: \$" with a line. The word "FRONT" is in the top right corner. The back view (bottom) shows "www.:" with a line and "Member Services Phone: " followed by a series of dashes for input. The word "BACK" is in the top right corner of the back view.

<http://studentinsurance.fsu.edu>



# Insurance and Billing

## In-Network Insurance Plans

- **Florida Blue (formerly Blue Cross Blue Shield)**
  - Network Blue/Blue Options
  - Blue Choice/PPO
  - Traditional
- **Aetna**
  - PPO
  - Managed Choice (POS)
  - HMO
- **United HealthCare**
  - Choice Plus
  - PPO & POS
- **CIGNA**
  - PPO
  - OAP (Open Access Plus)
- **Humana (Out-of-Network for Psychiatry and Physical Therapy)**
  - PPO
  - POS
- **Tricare (Out-of-Network for Psychiatry)**
  - Select
  - Prime (Out-of-Network, Referral from your PCM is required)
- **Capital Health Plan (CHP) (Out-of-Network for Physical Therapy)**
- **United Behavioral Health**



# Insurance & Billing

- Routine face-to-face visits with a general medical clinician are covered under student health fee if not paid by insurance
- Co-pay not collected at time of visit
- All visits, procedures, labs, diagnostic imaging & specialty visits will be billed to insurance carrier
- Outstanding balances post to student account
  - Registration hold for following semester





# University Health Services Student Insurance Rates 2019/2020

	Domestic Student	International Student
<b>Annual:</b> August 15 – August 14	\$2,563	\$2,606
<b>Fall:</b> August 15 – December 31	\$973	\$990
<b>Spring/Summer:</b> January 1 – August 14	\$1,590	\$1,616
<b>*Summer:</b> May 10 – August 14	\$681	\$693

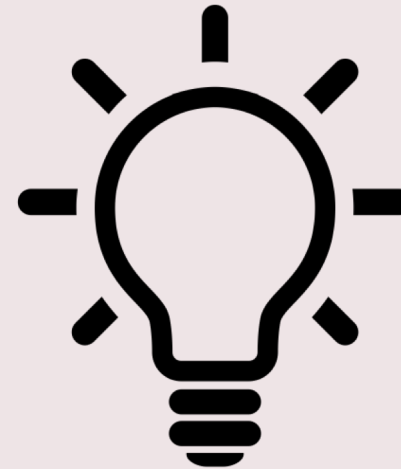
\*Please note that “Summer” coverage is only available to summer admits.

[studentinsurance.fsu.edu](http://studentinsurance.fsu.edu)



# Tips for First Year Students

- Call or walk in to schedule an appointment
- Bring your FSU ID and health insurance card with you
  - Have picture of front and back of card
- Know your medical (and family) history
  - Allergies and reactions
- Understand your insurance coverage
  - Know whether your insurance uses Quest or LabCorp
- Practice regular self-care
  - Bring a “feel better” kit
    - OTC medications, Band-Aids®, thermometer
  - Maintain healthy diet and adequate rest
  - Keep all appointments as scheduled
- Practice navigating the healthcare system independently prior to coming to FSU
  - Make an appointment, pay a co-pay, fill a prescription





[uhs.fsu.edu](https://uhs.fsu.edu)



[@FSUHealthServices](https://www.facebook.com/FSUHealthServices)



[@fsu\\_health](https://twitter.com/fsu_health)



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myFSU Mobile**



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- There will now be a 10-minute break. Please be back in your seats by 10:10 a.m. for the Campus Safety presentation.
- Questions? UHS Staff can answer your questions in a 1-on-1 setting in ASLC 101A (outside the theater and to the left).
- Coffee is available for purchase in the lobby.