



## Please read the following for clarification regarding Health Insurance for MacDuffie School attendance:

In order to ensure prompt and appropriate medical attention is given to your child, either for well-care or in the event of an emergency, The MacDuffie School requires that your child have medical insurance. We must have proof of medical insurance, as well as a signed "Permission for Medical Treatment" form on file for each student. Students aged 18 and over may sign their own "Permission for Medical Treatment" form.

Insurance must meet the following minimum qualifications:

- Private Insurance must be US-based on medical insurance from an Affordable Care Act (ACA), a credible plan. Information on whether your insurance meets ACA standards may be obtained from your insurer or from your employer's benefits administrator.
- Mass Health\*
- State Health Insurance provided by a state other than Massachusetts (e.g. an SCHIP/Medicare plan)\*
- Traveler Insurance program\*\*

\*State health insurance frequently requires prior authorization for out-of-state travel. It is up to the parent/guardian's responsibility for obtaining travel authorization prior to boarding trips, field trips, and activities. It is also the parent/guardian's responsibility to obtain prior authorization for students whose primary residence is outside the Commonwealth of Massachusetts for their respective states' SCHIP health insurance plan prior to boarding their children at MacDuffie.

\*\* A travel insurance program, administered by International School Management (ISM), is available for all students at an additional fee. This is a **hazard-only** insurance plan that will ensure access to care, but that has a deductible AND 20% co-payment for reasonable and customary cost of treatment. **IT WILL NOT COVER THE ENTIRETY OF AN EMERGENCY OR ROUTINE MEDICAL BILL.** Other non-hazardous (such as a sports injury) are subjected to a maximum coverage amount instead of 80% coverage, or not covered. This insurance is **required** for all international students, and all students who are unable to provide proof of private insurance. This insurance is **recommended** for students with state-sponsored SCHIP health insurance whose primary residence is outside the Commonwealth of Massachusetts. It is **optional** for students with private health insurance and MassHealth.

I have read and fully understand the above stated Health Insurance Disclaimer. I also understand that any medical billing for my child not covered by health insurance will be the sole responsibility of the student's family to pay.

Name of Student

Name and Signature of Parent/Guardian

Date