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## **Student** Assembly

## R53: Appendix B

Category	Student Experience (Status Quo)	Cornell Health Current Policy	Proposed Improvements (Your Resolution)
General Access	Students with Medicaid/Medicare often confused or pay out-of- pocket	All students may access Cornell Health, regardless of insurance	Maintain access, but expand clarity and navigation support
Medicaid – Medical Billing	Covered students unaware if services are billed	Services billed to NY Medicaid (excluding pharmacy); most in-house care covered	✓ Publish multilingual list of covered services; include this in all appointment welcome packets and on website
Medicaid – Pharmacy Access	X Must pay full cost at pharmacy; no billing	X Pharmacy services not billable to Medicaid; must pay or use other insurance	voucher/reimbursement
Medicaid – Enrollment Support	➤ No assistance; must enroll independently	➤ No enrollment support or NYSOH navigation	Host biannual Medicaid enrollment drives (August & January) with Human Services Coalition & NY State of Health navigators
Medicaid – Out-of-State Plans	X Must delay or switch enrollment with no support	X No support or info for out-of-state Medicaid plan transitions	Offer guidance on temporary NY Medicaid enrollment options while enrolled in classes
Medicare – Service Billing	X Student pays 100% out-of-pocket or gets referred out	X Cannot bill Medicare directly; students referred off- campus, must pay if seen at Cornell Health	➤ Build formal Medicare referral coordination program and support documentation for external care
Medicare – Scheduling Help	X Students must research and contact providers on their own	X No formal list or navigation support	Create and publish directory of local Medicare-participating providers; helpl students coordinate appointments
Telehealth for Medicare Students	X Not available or coordinated	X No telehealth coverage infrastructure in place	✓ Partner with Weill Cornell Medicine to offer specialty care