Once he made the decision to go, traveling from the United States to the United Kingdom for graduate study in technology policy seemed fairly straightforward for Paul Monroe – until it came time to figure out how two different health systems would cover the same (expensive!) treatments he used back home in Pittsburgh, Pennsylvania.

Navigating local educational institutions, health care systems, or border customs are not always easy to understand. Differences in treatments, rules about importing medications, and varying definitions of disability can compound the confusion.

Paul had to manage a lot of moving pieces and parts, such as where he could receive the treatment, what doctors and administrators needed about his treatment history, which insurance schemes (if any) would cover his treatment and how to qualify, what the university could do to help him, and backup sources for care and payment.

Receiving my treatment at home can sometimes be a challenge in itself, and given the complexity of my case, there was little help readily available. This experience was certainly a trial by fire in learning to manage my healthcare in an international context.

Paul was very detailed in his research, learning his options, and being persistent in getting responses from the U.K.’s national health system about if his particular treatment for Crohn’s disease would be available for him during his year at the University of Cambridge.

After collecting extensive documentation on his treatment history and meeting with multiple physicians and administrators in the U.K., he finally received a “YES!” response, but he proceeded cautiously and made back-up plans. Several days before his scheduled treatment, however, he received the news that the treatment had not been approved for funding by the regional authorities. He couldn’t risk missing regular doses, so he maintained his home insurance and flew home periodically, primarily at his own expense, due to little other funding or coverage options.
Working Together to Find Answers

Since many people do not have health insurance that covers them while traveling abroad except in emergencies, they purchase supplemental plans which may not cover pre-existing conditions.

Plans offered to international exchange participants for less than a year of coverage are not fully licensed products, so changes to U.S. health laws through the Patient Protection and Affordable Care Act do not apply. These plans can increase costs, have pre-existing condition exclusions, or deny enrollment to an individual based on health status.

When Atlas Corps accepted an international participant who was HIV-positive, they realized their group insurance excluded his condition. While they found a separate plan through Patriot Travel that did not exclude people living with HIV, any needs related to HIV condition would not be covered. Like all participants, he was encouraged to bring the maximum amount of allowable medications and to get thoroughly checked out by a doctor before traveling. Since he could only get six month’s worth of medications, he agreed at his own expense to fly home mid-point of the fellowship for more medications and another doctor check-up.

“He was very determined to not let this affect his fellowship, so he was able to come. He’s had no issues since he’s been here and been fine,” says Nicole Pytlik at Atlas Corps.

For two exchange participants with kidney dialysis and a transplant, health insurance turned out to be a non-issue due to pre-existing condition coverage in their university student plans. This allowed time for other research required in making arrangements.

Rob Venable in the disability office at Northern Texas University assisted one of the students by connecting him to Global Dialysis that lists centers in the United Kingdom, communicating with the host family and study abroad office, and negotiating his schedule and missed activities with the faculty leader.

If the doctor said there’s no problem with traveling for this student, then we needed to do everything that was reasonable that we can to arrange accommodations for him.

Robert Wenc, the community liaison for international students at Michigan Technological University, similarly worked to assist a student who had a kidney transplant several years ago in China before coming for his undergraduate degree in the United States.

Robert reviewed government sites to see what medications could legally be brought, contacted their student insurance company to confirm coverage, connected doctors in both countries, and asked international colleagues on listservs for other advice. Also, the local hospitals, pharmacists, and doctors helped translate the Chinese medical records, research the medications to see if they
were available in the United States (they were, except one only patented in China), and arrange for nephrologist visits that were covered by insurance.

“The student’s correspondence with me was clear – that was one of the good things in that he had a good grasp of English. By the time he came, I had worked with him so much by email that I had emotional connection with him.”

It’s the teamwork of these professional staff that can help to ease the way, and assist exchange participants to get started off on the right foot – and a step towards changing the underrepresented status of students with medical-related disabilities in study abroad and other exchanges.

**Negotiating Group Health Policies**

- Remove exclusions for pre-existing conditions
- Reduce the time period defining pre-existing conditions
- Offer limited coverage to a certain maximum dollar amount for pre-existing conditions or medications
- Specify coverage in the case of an emergency to stabilize a pre-existing condition
- Exclude from the definition of a pre-existing condition, any condition in which one takes a prescribed drug or medicine that remains controlled without any change in a required prescription prior to the start of coverage

**3 Ways To Get Health Coverage While Overseas**

[www.miusa.org/resource/tipsheet/healthcoverage](http://www.miusa.org/resource/tipsheet/healthcoverage)

**Medications When Traveling Internationally Tipsheet**

[www.miusa.org/resource/tipsheet/medications](http://www.miusa.org/resource/tipsheet/medications)

**10 Tips for Chronic Health Conditions & Planning for Your International Exchange**

[www.miusa.org/resource/tipsheet/chroniclealth](http://www.miusa.org/resource/tipsheet/chroniclealth)