## LOA /Abbreviated Academic Curriculum Checklist

# Registration/Accident Insurance:

- Registration for fewer than 9 credits in a semester will prevent you from purchasing UMB accident insurance which is:
  - ♣ When an Accident occurs while on campus, attending a practicum program or other recognized student group approved by the College or during travel to and from a program, the plan offers comprehensive benefits that include hospital room and board, inpatient and outpatient surgical procedures, labs and x-rays, physician office visits, ambulance, durable medical equipment, emergency care and prescription drugs.
  - ♣ The maximum benefit allowed for each accident is \$50,000.
  - ♣ Services are covered at 100% of Reasonable and Customary Charges.
  - \* Please refer to <a href="www.gallagherstudent.com/umb">www.gallagherstudent.com/umb</a> for complete details regarding coverage, limitations, and exclusions.

#### Medical Insurance:

- You are covered by your medical insurance through the semester for which you are registered, after which a conversion will have to be initiated by calling CareFirst at 1-800-458-1981.
- If you have questions regarding your campus group policy while on LOA contact James Reynolds at 410-706-0458.

## Malpractice Insurance:

- You are covered by malpractice insurance through the semester for which you are registered.
- Students on LOA status are not covered by malpractice insurance.

## Student Accounts & Financial Aid:

- It is the responsibility of the student to contact both Student Accounts (Jordan Nixon 410-706-2929 or Linda Ferriera 410-706-2930) and the Office of Financial Aid (Patricia Scott 410-706-7347) to clear up any balances, and to find out how this LOA will affect your financial aid award(s).
- Students on approved leave for research positions may qualify to register for Special Research Elective with tuition remission. These students will be responsible for payment of student fees and health insurance fees (if applicable).

#### Schedule:

- For years 1 and 2, notify all course directors of your dates of departure and return. Don't forget ICM or any other electives such as CAPP, Family Care Track, Medical Spanish.
- For years 3 and 4, complete add/drop forms with signatures from course directors for any remaining rotations on your schedule. Additionally, please contact this office (OSA) eight (8) weeks before your return to work on a new clinical schedule.

#### List Serve:

• Contact the Office of Medical Education at <a href="medscope@som.umaryland.edu">medscope@som.umaryland.edu</a> to be placed on the appropriate list serve.

<u>Contact Information:</u> Below plantile on LOA.	lease write the address and email address the school	should use to contact you
Address:	Email:	
	lerstand that it is my responsibility to address these hould reassess the implications of all of these issues	
Student Signature		
Student Name (Please Print)		