SLU Student Health Plan (UHP) Waive/Enroll Guide – Undergrad/Graduate/Graduate Assts – Summer 2024

Summer 2024 health insurance coverage is required for on-campus International students. If student has other (non-UHP) health coverage that meets SLU Waiver Criteria, they may **Waive** the UHP coverage (and its charges). If a student does *not* have health coverage, they must **Enroll** in the SLU Student Health Plan (UHP). **Summer 2024** deadline to waive or enroll **on-line** through the Aetna portal is: **June 7, 2024**. Manual submission of ID cards will be required thereafter. Summer Open Enrollment formally ends: **June 30, 2024**. If students take no action by **June 30, 2024** deadline, they will be auto-enrolled in **Summer 2024** UHP coverage and responsible for related charges. Enrollment is optional for registered/returning domestic students.

This document details how to submit a waiver request or enroll through the secure website provided by Aetna Student Health. After class registration, please allow 2-3 business days for student data to load to the Aetna website. **See pages 1-2 below for Waiver directions. Enrollment directions are on pages 3-5.**

Waiver Directions

* Open browser: Use of Microsoft Edge or Google Chrome is recommended.

Go to: **www.aetnastudenthealth.com/slu** **or** directly access site thru SLU website using:

then scroll to: Enroll/Waive ▸

Waive or Enroll Through Aetna Online

* Review info. presented on page and Scroll down and click on: Waive

Secure Login

* On **Secure Login** screen**,** use pull down menu to indicate if a **Domestic** or **International Student.** International selection indicates student is pursuing studies under a Visa:

Are you a domestic or an international student? *
- [Select Type]
- Domestic
- International

* Next, use pull down menu to indicate **type of program**:

What type of program are you enrolled in? *
- [Please Select]
- Undergraduate Student
- Graduate & Professional Student
- Medical Students

* Enter: **Student Banner ID#** (enter 9 digit Banner ID#. May *including leading zeroes*)

Banner ID *
[   ]

* Type in: Student Date of Birth:

Date of Birth • ⑦

[   ] 🗓

MM-DD-YYYY

* Click on Login to continue:

Login

Plan Selection(s)

* Click on Waive:

Waive

NOTE: *If you receive an error indicating that you are not eligible or not required to waive/enroll, call the UHP Office at 314-977-5666 or email uhp@health.slu.edu for further assistance.*

* Click on Yes to continue with waiver entry:

Yes

* Read Message and review Waiver Policy Terms. Check box at bottom to accept terms.

* Click on Continue:

Continue

Current Medical Insurance Information

* Students are *encouraged* to upload front and back images of Medical Insurance ID Card.

> **IMPORTANT NOTE:** While uploading ID Cards is encouraged, ID Card uploads are *not* 100% required to submit a waiver request. When uploading ID Cards, please load images that are smallest file size possible. Also, some browser security settings restrict file uploads. If your waiver submission fails with uploaded ID Card files, try to re-submit *without uploading* ID Card files.

* Respond to all questions and enter data regarding your current (non-UHP) health insurance.

* Review Terms and Conditions and check box at bottom of page to indicate acceptance.

* Click on Continue:

Continue

Waiver Summary

* Review the Waiver Summary. Edit & save any necessary changes to Waiver Summary data.

* Click Submit to complete your waiver submission.

Submit

After hitting Submit, a **Confirmation/Transaction Number:** should display on screen. This number validates successful filing. Save the Transaction #. Confirmation email will also be sent to email address provided. Approved waivers take 3 - 5 days *business* days to process/adjust student accounts.

If you do not receive a **Confirmation/Transaction Number:** *your submission may NOT have filed*. Please re-submit or contact the UHP Office at: **(314) 977-5666** or *uhp@health.slu.edu* for assistance.

Aetna representatives may contact you if there are any questions or concerns with your waiver submission. Waivers are subject to verification by SLU, Aetna and/or their contractors/representatives.

Enrollment Directions

* Open browser. Use of   Microsoft Edge [icon]   or   Google Chrome [icon]   is recommended.

Go to: **www.aetnastudenthealth.com/slu**   **or**   directly access site thru SLU website using:

then scroll to: [Enroll/Waive icon]   [**Waive or Enroll Through Aetna Online**]

* Review info. presented on page and Scroll down and click on: [**Enroll**]

[**Secure Login**]

* At **Secure Login,** use pull down menu to select either **Domestic** or **International.** An International selection indicates that student is pursuing studies under a Visa.

Are you a domestic or an international student? *

| [Select Type] |
| Domestic |
| International |

* Next, use pull down menu to indicate **type of program**:

What type of program are you enrolled in? *

| [Please Select] |
| Undergraduate Student |
| Graduate & Professional Student |
| Medical Students |

* Enter: **Student Banner ID#** (enter **9 digit** Banner ID#. May *including leading zeroes*)

Banner ID *

[   ]

* Enter: **Student Date of Birth**:

Date of Birth * (?)

[   ] [calendar icon]

MM-DD-YYYY

[**Login**]

* Click on **Login** to continue:

Plan Selection(s)

* To enroll **Yourself,** click **Select Plan** under **23/24 Health Plan:**

23/24 Health Plan

SLU requires all full-time domestic and international Undergraduate, Graduate & Professional and Medical Students to enroll or waive the school-sponsored student health insurance plan.

Select Plan

NOTE: *If you receive an error indicating that you are not eligible nor required to waive/enroll, you may call the Student Health Plan (UHP) office at 314-977-5666 or email* ***uhp@health.slu.edu*** *for further assistance.*

If you want to enroll **Dependents**, click **Add Dependents(s):**

23/24 Health Plan

International Graduate & Professional Students can enroll their eligible dependents in the 2023-2024 health insurance plan.
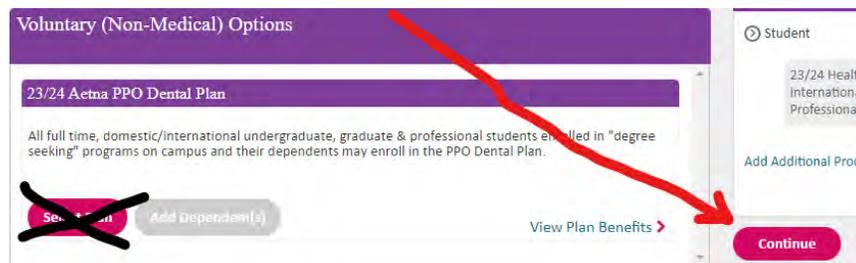
Add Dependent(s)
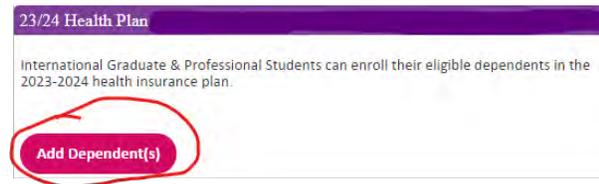
Continue

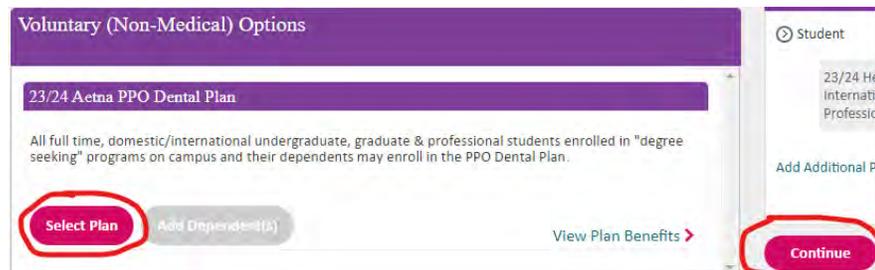***** Once selections are complete, click on **Continue**:

* For FY 23/24, Aetna is offering an **Optional/Voluntary Dental PPO plan**. The Aetna dental plan is completely separate from the medical plan. Students may elect this coverage but it is ***not required***.

Payment for dental coverage will be requested upon check-out. Charges for medical coverage will continue to be billed to SLU student accounts.

Decline Dental: To **decline** dental coverage, just click **Continue** to bypass / skip the page.

Voluntary (Non-Medical) Options

> Student

23/24 Aetna PPO Dental Plan

23/24 Health International Professional

All full time, domestic/international undergraduate, graduate & professional students enrolled in "degree seeking" programs on campus and their dependents may enroll in the PPO Dental Plan.

Add Additional Prod

Select Plan   Add Dependent(s)   View Plan Benefits >   **Continue**

Enroll Dental: To elect optional dental coverage,   1) click **Select Plan**
2) **Add Dependent(s)** if needed
3) click **Continue**

Voluntary (Non-Medical) Options

> Student

23/24 Aetna PPO Dental Plan

23/24 He Internatic Professio

All full time, domestic/international undergraduate, graduate & professional students enrolled in "degree seeking" programs on campus and their dependents may enroll in the PPO Dental Plan.

Add Additional P

Select Plan   Add Dependent(s)   View Plan Benefits >   **Continue**

Student Information

* Confirm/complete **Student's** (and dependent's) gender, name, phone, <mark>local address</mark>, and <mark>SLU (@slu.edu) email</mark> info.

* Once info. is confirmed, click on **Continue**:

[Continue]

Plan Effective/Termination date(s)

* **Select Term** of coverage desired:

The student coverage option is:

        Summer   05/19 - 08/14   Session 4

Important: Graduates and **Graduate Assistants** with health insurance support may be presented additional coverage Effective/Termination Date options that correlate to the dates of "paid health insurance" as noted on their appointment contracts.

If the Effective/Termination Dates do **not** correlate to your "paid health insurance" dates, contact the Student Health Plan (UHP) office at **314-977-5666** or email **uhp@health.slu.edu** to have the Effective/Start dates reviewed/updated to match your "paid health insurance" dates.

NOTE: Graduate Assistants will be responsible for costs of insurance coverage that are elected but not covered appointment contracts.

* Check terms and conditions after review:

[✓] By selecting this box I agree to these **terms and conditions** for the above plan

Click **Continue**:

[Continue]

Enrollment Application Summary

* Carefully **Review** data for accuracy.

* Click **Submit** to complete your enrollment.

[Submit]

After hitting Submit, a **Confirmation/Transaction Number:** should display on screen. This number validates successful filing. Save the Transaction #. Confirmation email will also be sent to email address provided. Approved waivers take 3 - 5 days *business* days to process/adjust student accounts.

If you do not receive a **Confirmation/Transaction Number:** *your submission may NOT have filed*. Please re-submit or contact the UHP Office at: **(314) 977-5666** or *uhp@health.slu.edu* for assistance.