If you have recently completed the Health Coverage Declaration, please disregard this email.

If you do not wish to have health insurance through the Student Health Benefit Plan for the fall semester and pay the associated premium of $1,272, you must complete the Health Coverage Declaration and provide proof of your own health insurance by October 1. Go to your Student Center to complete the declaration.

Visit our website for more information or contact our office with questions.

Office of Student Health Benefits
University of Minnesota
410 Church Street SE, N323
Minneapolis, MN 55455
Phone: 612-624-0627 or 1-800-232-9017
Fax: 612-626-5183 or 1-800-624-9881
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