

Hello!

Our office has received your waiver submission for the Fall 2023 semester. Upon review, our office found that your waiver submission was invalid.

The Health Coverage Declaration (HCD) has been re-applied to your account. Please ensure that you **include the Member ID* and Group Number** (if applicable) along with your insurance company's name. The field for Payer ID Number may be left blank or N/A may be used.

The University of Minnesota requires all students taking at least 6 or more credits in a degree-seeking program (3 credits in summer) to have health insurance. To satisfy this requirement, the online Health Coverage Declaration is assigned to students to either enroll in or waive the Student Health Benefit Plan (SHBP) with their proof of health insurance.

The deadline to submit this information is September 28, 2023.

*Member ID may be defined as Policy Number or ID, Subscriber Number or ID, Identification Number or ID, and Membership Number or ID. Any of these numbers may be inputted in the "Member ID" box. If you have questions regarding what information should be inputted please contact our office as we may assist you. <u>Please avoid inputting only N/A</u> <u>in all the fields or phrases such as "waiting for information" or "pending" as this will result in</u> <u>an invalid submission which will void the waiver.</u>

For current SHBP enrollees:

If you are enrolled on the Student Health Benefit Plan and wish to continue coverage please select "Enroll Me". Do not select "Waive Me" and put in your insurance information. SHBP cannot be used to waive SHBP.

Let our office know if you have any 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 umshbo@umn.edu | www.shb.umn.edu Copyright © 2023 Regents of the University of Minnesota, all rights reserved. The University of Minnesota is an equal opportunity educator and employer.

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