Hello Gopher!

You have not completed the required Health Coverage Declaration for spring semester 2024. To complete the declaration and fulfill the University’s health insurance requirement, please go to your Student Center. If you have recently completed the Health Coverage Declaration, please disregard this email.

**If you have your own health insurance**
You must complete the online Health Coverage Declaration to provide proof of your own health insurance. Choose “Waive Me” and provide your health insurance information in your Student Center. If you do not do this, you will be enrolled in the Student Health Benefit Plan and $1,795 will be billed to your student account.

**If you intend to continue enrollment in the Student Health Benefit Plan**
Please complete the Health Coverage Declaration and choose “Enroll Me” to confirm your enrollment in the Student Health Benefit Plan.

**If you are enrolled or have submitted to enroll in the Graduate Assistant Health Plan**
Complete the Health Coverage Declaration and waive the Student Health Benefit Plan by entering the following information:

- Name of insurance company: Graduate Assistant Health Plan
- Health plan member ID number: Your student ID number

**The deadline to complete the Health Coverage Declaration is February 8, 2024.**

For more information, visit the Office of Student Health Benefits website.

Please contact our office with 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

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