Dear enrollee,

If you’re enrolled in the Graduate Assistant Health Plan (GAHP) through spring semester, you will automatically remain enrolled through **August 31, 2018** (even if you are graduating at the end of spring semester) - unless you fill out a change form indicating you would like to cancel coverage.

If you choose to cancel your coverage, please complete the Graduate Assistant Health Plan Enrollment and Change form and email, fax or mail it to the Office of Student Health Benefits. Coverage will be cancelled on the last day of the month in which your form is submitted. Cancellation requests must be submitted by May 31 for coverage to end on May 31, 2018. If you are an international student, you may cancel coverage with proof of US-based employer health coverage or verification of return to your home country for 90 days or more.

**Summer Premium**
You will receive a University contribution toward summer coverage based on the academic year semesters in which you held a qualifying graduate assistantship. For example, if you held a 50% assistantship during both fall and spring semesters, then you will not owe an additional premium for summer coverage.

Wondering how much you will be billed for summer 2018 coverage? Find out using the Summer Premium Calculator, found on our Summer Coverage page.

If you’re covered by a graduate fellowship or traineeship, you will be responsible for the entire summer premium, unless the department in which you are employed has submitted funding for your summer coverage.

**If your department agrees to pay your summer premium, they must contact the Office of Student Health Benefits before May 31, 2018 to make arrangements.** Students who do not receive a full contribution for summer coverage will be billed for the balance.

If you are unsure about your eligibility or percentage of appointment time, please contact the department where you are employed.

**Continuation of Coverage**
After losing eligibility for the GAHP, you have the option to continue coverage for up to 18 months. Find more information on our website.

Please contact our office if you have 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