If you've recently submitted a waiver for spring 2017, please disregard this email.

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Dear University of Minnesota international student,

Welcome to the University-sponsored Student Health Benefit Plan (SHBP)! You are enrolled for spring semester 2017, and your coverage is effective January 17, 2017 through August 20, 2017.

Coverage Basics

Blue Cross and Blue Shield of Minnesota provides the health plan network and claims administration services for the SHBP, which gives you access to thousands of providers and hospitals in their worldwide network.

In addition to having no deductible and 100% coverage for preventative care, the SHBP has many additional benefits, such as:

- Doctor on Demand: an app that connects you to a video visit to diagnose and treat common medical issues
- Stop Smoking Support: a program that supports your journey to being tobacco-free
- Emergency travel assistance: gives you access to assistance 24-hours a day while traveling

To learn more about your coverage, visit our website. We recommend that you explore the pharmacy benefits, additional benefits and the SHBP full benefits summary.

ID Cards

You will receive a health plan card and information at your U.S. mailing address on file in MyU.

You can use the following information until you receive your card:

- Insurance company: Blue Cross and Blue Shield of MN
- Policy number: XZA99 (your University ID number)
- Group number: EP489-W2
- Member number: 00
- Customer Service phone number: 651-662-5004

Waiver Information

If you meet the following criteria, you are not required to purchase the University-sponsored SHBP:

- Enrolled in a United States-based employer-sponsored group health plan; or
- Enrolled in the University-sponsored Graduate Assistant Health Plan (GAHP); or
- Residing in your home country.
In order to waive the University-sponsored SHBP, submit the following to the Office of Student Health Benefits in person, by mail, email or fax by **February 2, 2017**:

- Proof of coverage such as a copy of the front and back of your insurance identification card; or
- A certificate of credible coverage obtained from your insurance company; or
- Proof of residence in your home country – a stamped passport or copy of airline ticket;

AND

- A completed [waiver form](#).

If you have any questions, please contact our office at 612-624-0627 or [umshbo@umn.edu](mailto:umshbo@umn.edu).

Have a great semester!

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](mailto:umshbo@umn.edu)
[www.shb.umn.edu](http://www.shb.umn.edu)

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Office of Student Health Benefits
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Minneapolis, MN 55455
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