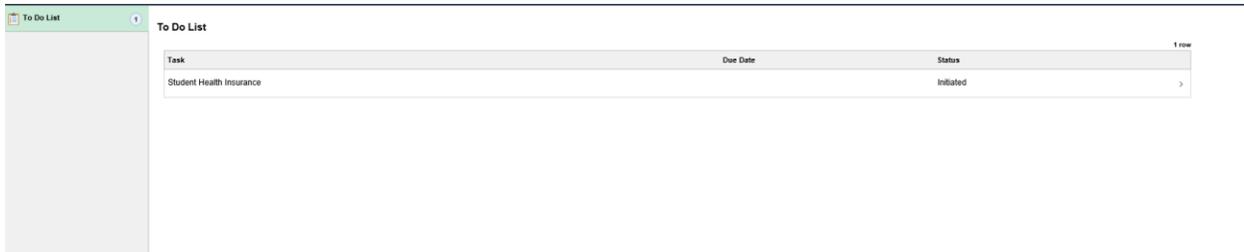**New Process for Fall 2022 SHI Enrollment**

Steps to Enroll in Student Health Insurance

1. Log into your catalyst account under UC Catalyst or the BearcatPortal.uc.edu for first year students.

    1. If logging on through Catalyst, this must be completed through the student account, not the parent delegated access and through a computer, laptop, or tablet device.

2. Click on **Tasks**

3. Click on **To Do** list on the left hand side

4. Click on **Student Health Insurance**

5. Click **Continue to Selection Page**

6. To waive the UC Student Health Insurance, click **Enroll**

Student Health Insurance Requirement

By clicking "ENROLL / OPT-IN" your coverage will be activated immediately (if the coverage period has begun) and your ID card will be made available to you via the United Health Care website. Prescription coverage will be activated within 24 hours of coverage activation. **Coverage cannot be cancelled once benefits have been utilized.**

ENROLL / OPT-IN

7. The Enroll/Opt-In link redirects to the United Healthcare Center. Ensure that all pop-up blockers are turned off if not automatically redirected.

8. Step 1 – Select a Policy Term

    1. Verify the term for which you are enrolling in coverage.

        1. Family plans will be done through a request through studins@ucmail.uc.edu.

    2. Click Next.

Opt - In					⊗

<div align="center">

Step ▮ - Select a Policy Term

● ● ● ●

Student Plan / Basic / UnitedHealthcare Insurance Company

Brochure

</div>

Term	Policy	Student	Price	Select
Fall	8/10/2022-12/31/2022	███████████████		☑

BACK   **NEXT**

9. Step 2 – Personal Information

    1. Enter your mailing address and phone number

        a. Do not use a pre-populated option for these, as the system will not recognize it.

    2. Permanent Address and SSN are optional.

    3. Click Next.

New Process for Fall 2022 SHI Enrollment

Opt - In

Step ■ - Personal Information

● ● ● ●

* Required

First Name *   Last Name *   Middle Initial   Gender *

Mailing Address *   City *   State *   Zip Code *

Email *   Phone Number

InsightMembershipTestin

☐ Permanent Address is same as above

Permanent Address   City   State   Zip Code

Student ID *   Birthday *   US SSN/ITIN

(E.g. mm/dd/yyyy)   **Privacy Policy**   Why provide this?

BACK   NEXT

10. Step 3 – Sign and Submit

    1. Check the confirm box

    2. Sign your name

    3. Click **Submit**

New Process for Fall 2022 SHI Enrollment

Step ▊ - Sign and Submit

● ● ● ●

* Required

Selected Coverage

Policy Number: 2022-202-1
School/Association Name: University of Cincinnati Main
Campus
Product Name: Student Plan
Coverage Type: Student
Effective Date: 8/10/2022
Expiration Date: 12/31/2022

NOTICE TO STUDENTS

Coverage will be effective on the effective date of the coverage period, unless otherwise stated in the Master Policy. By signing, the student acknowledges the following: 1) He/She has carefully read the brochure and elects to enroll as indicated on this enrollment card; 2) Rates are not pro-rated other than as listed on this enrollment card; 3) Premium is collected by the student's school and remitted to the Company on the student's behalf; 4) He/She meets the eligibility requirements for this coverage as described in the brochure; and 5) If it is later determined that the student is not eligible, the premium will be refunded. Premium will not be refunded except for ineligibility or entrance into the armed forces.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud

Confirm Purchase

☐ I elect to purchase insurance coverage under this student insurance plan. Above are the choices I have made.   TOTAL: ▊

Payer Signature *

_____ — 05/22/2022

[BACK]   [SUBMIT]

11. Confirmation of Enrollment

1.   You can click on Go To MyAccount to login and access your ID card and insurance policy information

Congratulations! You can print this page for your records. You will receive an email message confirming your enrollment.

Please note if you enrolled in a policy that includes pharmacy benefits, your benefits will be available 1-2 business days after receiving confirmation of your enrollment.

Insured Information

Primary Insured:
Date Of Birth:
Phone Number:
Email Address:

Mailing Address:

Plan:

Total:

GO TO MYACCOUNT   CLOSE

12. United Healthcare account.
     1. If you have never logged into UHCSR.com you will have to create a account.
     2. If you have previously created an account, you will be able to log in to view your information.

New Process for Fall 2022 SHI Enrollment

Login to My Account to access and manage your policy.

Login to My Account

Enter your username and password to continue...

* Indicates required field

Username *
_____

Password *
_____ ⑦

Did you forget your Username or Password?

| Create Account | SACM Member Create Account | Login |