



Qualifying Event: Enrollment Form

This form is for students who waived the Aetna Student Health plan for the current plan year and would like to enroll mid-year due to a qualifying event.

NATURE OF YOUR QUALIFYING EVENT:

If you experience a qualifying event (e.g., loss of insurance coverage, no longer eligible on your parent's insurance, marriage, divorce) during the plan year (9/1/-8/31), you can enroll in the Aetna Student Health insurance for the remainder of the plan year, which ends on August 31. Sign and date in the Enrollment Certification box below.

Reason for Qualifying Event:

- Loss of coverage/not eligible on parent's plan
- Marriage/Divorce
- Other _____

Date of Qualifying Event: _____

Effective Enrollment Date: _____

To be completed by UHS Insurance Advisor

STUDENT INFORMATION:

Name: _____ Male
(Last name, first name) Female

Student ID # : _____ **Birth Date:** _____
(Required) (mm/dd/yyyy)

Rochester Address: _____

E-mail Address (enter on line below ↓)

Student Phone #: _____
(Home phone or cell phone)

Spouse Name: _____ **Spouse Birth Date:** _____
(If enrolling your spouse) (Last name, first name) (mm/dd/yyyy)

ENROLLMENT CERTIFICATION:

I wish to enroll in the Aetna Student Health insurance available to University of Rochester full-time students. I understand my coverage will continue through August 31, 2012. The charge for the insurance will be pro-rated and charged to my tuition statement. If I am enrolling my spouse, I understand I am required to pay the mandatory health fee for my spouse and that this fee and the health insurance fee will be added to my tuition statement. I understand that my coverage may be subject to pre-existing limitations as described in the Student Health Insurance Plan, which is available on the University of Rochester page on the Aetna Student Health web site.

Student/Parent Signature: _____ **Today's Date:** _____

SUBMITTING THE FORM:

Send this form to the UHS Insurance Advisor by fax (585-756-0263), e-mail (insurance@uhs.rochester.edu), or mail (UHS Insurance Advisor, P.O. Box 270617, 738 Library Road, Rochester, NY 14627).

UHS will process your form within 4-5 business days of receipt. Your insurance card will be mailed to you by Aetna Student Health. If you do not receive your card within 2-3 weeks, you can call Aetna Student Health at 800-897-7042 to inquire about your card.

FOR MORE INFORMATION:

Visit the UHS web site at www.rochester.edu/uhs. Look in the pink "Quick Links" box. If you have questions about enrolling in the plan, e-mail the UHS Health Insurance Advisor at insurance@uhs.rochester.edu for assistance.

Revised 8/30/11