

SLU Student Health Plan (UHP) Waive/Enroll Guide – Undergrad/Graduate/Graduate Assts – Spring 2024


SLU requires full-time, on-campus students to carry health coverage. If a student has other (non-UHP) health coverage that meets SLU's criteria, they may **Waive** the UHP coverage (and its charges). If a student does not have health coverage, they must **Enroll** in the SLU Student Health Plan (UHP). **Spring 2024** deadline to waive or enroll is: **February 14, 2024**. If students take no action by the deadline, they will be auto-enrolled in **Spring 2024** UHP coverage and responsible for related charges.

This document details how to submit a waiver request or enroll through the secure website provided by Aetna Student Health. After full-time class registration, please allow 2-3 business days for student data to load to the Aetna website. **See pages 1-2 below for Waiver directions. Enrollment directions are on pages 3-5.**

Waiver Directions

* Open browser: Use of  Microsoft Edge or  Google Chrome is recommended.

Go to: www.aetnastudenthealth.com/slu **or** directly access site thru SLU website using:

Scroll down to:  [Enroll/Waive >](#)

Waive or Enroll Through Aetna Online

* Review info. presented on page and Scroll down and click on:

Enroll/Waive

Secure Login

* On **Secure Login** screen, use pull down menu to indicate if a **Domestic** or **International Student**. International selection indicates student is pursuing studies under a Visa:

Are you a domestic or an international student? *

[Select Type]
Domestic
International

* Next, use pull down menu to indicate **type of program**:


What type of program are you enrolled in? *


[Please Select]
Undergraduate Student
Graduate & Professional Student
Medical Students

* Enter: **Student Banner ID#** (enter 9 digit Banner ID#. May including leading zeroes)

Banner ID *

* Type in: **Student Date of Birth:**

Date of Birth 

MM-DD-YYYY 

* Click on **Login** to continue:

Login

Plan Selection(s)

Waive

* Click on **Waive**:

NOTE: If you receive an error indicating that you are not eligible or not required to waive/enroll, call the UHP Office at **314-977-5666** or email uhp@health.slu.edu for further assistance.

Yes

* Click on **Yes** to continue with waiver entry:

* Read **Message** and review **Waiver Policy Terms**. Check box at bottom to accept terms.

Continue

* Click on Continue:

Current Medical Insurance Information

* Students are encouraged to upload front and back image of Medical Insurance ID Card.

IMPORTANT NOTE: While uploading ID Cards is encouraged, ID Card uploads are *not* 100% required to submit a waiver request. When uploading ID Cards, please load images that are smallest file size possible. Also, some browser security settings can restrict file uploads. If your waiver submission fails with uploaded ID Card files, try to re-submit *without uploading* ID Card files.

* Respond to all questions and enter data regarding your current (non-UHP) health insurance.

* Review Terms and Conditions and check box at bottom of page to indicate acceptance.

Continue

* Click on Continue:

Waiver Summary

* Review the Waiver Summary. Edit & save any necessary changes to Waiver Summary data.

Submit

* Click **Submit** to complete your waiver submission.

After hitting Submit, a **Confirmation/Transaction Number:** should display on screen. This number validates successful filing. Save the Transaction #. Confirmation email will also be sent to email address provided. Approved waivers take 3 - 5 days *business* days to process/adjust student accounts.

If you do not receive a **Confirmation/Transaction Number:** *your submission may NOT have filed.* Please re-submit or contact the UHP Office at: **(314) 977-5666** or uhp@health.slu.edu for assistance.

Aetna representatives may contact you if there are any questions or concerns with your waiver submission. Waivers are subject to verification by SLU, Aetna and/or their contractors/representatives.

Enrollment Directions

* Open browser. Use of  Microsoft Edge or  Google Chrome is recommended.

Go to: www.aetnastudenthealth.com/slu or directly access site thru SLU website using:



Scroll down to: [Enroll/Waive >](#)

Waive or Enroll Through Aetna Online

* Review info. presented on page and Scroll down and click on:

Enroll/Waive

Secure Login

* At **Secure Login**, use pull down menu to select either **Domestic** or **International**. An International selection indicates that student is pursuing studies under a Visa.

Are you a domestic or an international student? *

[Select Type]
Domestic
International

* Next, use pull down menu to indicate **type of program**:

What type of program are you enrolled in? *

[Please Select]
Undergraduate Student
Graduate & Professional Student
Medical Students

* Enter: **Student Banner ID#** (enter 9 digit Banner ID#. May including leading zeroes)

Banner ID *

* Enter: **Student Date of Birth:**

Date of Birth * (?)



MM-DD-YYYY

* Click on **Login** to continue:

Login

Plan Selection(s)

* To enroll **Yourself**, click **Select Plan** under **23/24 Health Plan**:

23/24 Health Plan

SLU requires all full-time domestic and international Undergraduate, Graduate & Professional and Medical Students to enroll or waive the school-sponsored student health insurance plan.

Select Plan

NOTE: If you receive an error indicating that you are not eligible nor required to waive/enroll, you may call the Student Health Plan (UHP) office at 314-977-5666 or email uhp@health.slu.edu for further assistance.

If you want to enroll **Dependents**, click **Add Dependents(s)**:

23/24 Health Plan

International Graduate & Professional Students can enroll their eligible dependents in the 2023-2024 health insurance plan.

Add Dependents(s)

Continue

* Once selections are complete, click on **Continue**:

* For FY 23/24, Aetna is offering an **Optional/Voluntary Dental PPO plan**. The Aetna dental plan is completely separate from the medical plan. Students may elect this coverage but it is **not required**.

Payment for dental coverage will be requested upon check-out. Charges for medical coverage will continue to be billed to SLU student accounts.

Decline Dental: To **decline** dental coverage, just click **Continue** to bypass / skip the page.

Voluntary (Non-Medical) Options

23/24 Aetna PPO Dental Plan

All full time, domestic/international undergraduate, graduate & professional students enrolled in "degree seeking" programs on campus and their dependents may enroll in the PPO Dental Plan.

~~Select Plan~~ Add Dependents(s) View Plan Benefits >

Continue

Enroll Dental: To elect optional dental coverage, 1) click **Select Plan**
2) **Add Dependents(s)** if needed
3) click **Continue**

Voluntary (Non-Medical) Options

23/24 Aetna PPO Dental Plan

All full time, domestic/international undergraduate, graduate & professional students enrolled in "degree seeking" programs on campus and their dependents may enroll in the PPO Dental Plan.

Select Plan Add Dependents(s) View Plan Benefits >

Continue

Student Information

* Confirm/complete **Student's** (and dependent's) gender, name, phone, **local address**, and **SLU (@slu.edu) email** info.

Continue

* Once info. is confirmed, click on **Continue**:

Plan Effective/Termination date(s)

* **Select Term** of coverage desired:

The default student coverage options are:

Spring 01/01 - 05/18

Spring/Summer 01/01 - 08/14

Important: Graduate Assistants with health insurance support should be presented coverage Effective/Start Dates options that correlate to the dates of "paid health insurance" as noted on their appointment contracts.

If the Effective/Start Dates do **not** correlate to your "paid health insurance" dates, contact the Student Health Plan (UHP) office at **314-977-5666** or email **uhp@health.slu.edu** to have the Effective/Start dates reviewed/updated to match your "paid health insurance" dates.

NOTE: Graduate Assistants will be responsible for costs of insurance coverage that are elected but not covered appointment contracts.

* Check terms and conditions after review:

☒ By selecting this box I agree to these **terms and conditions** for the above plan

Continue

Click **Continue**:

Enrollment Application Summary

* Carefully **Review** data for accuracy.

Submit

* Click **Submit** to complete your enrollment.

After hitting Submit, a **Confirmation/Transaction Number:** should display on screen. This number validates successful filing. Save the Transaction #. Confirmation email will also be sent to email address provided. Approved waivers take 3 - 5 days *business days* to process/adjust student accounts.

If you do not receive a **Confirmation/Transaction Number:** *your submission may NOT have filed.* Please re-submit or contact the UHP Office at: **(314) 977-5666** or **uhp@health.slu.edu** for assistance.