



# Geneva College STUDENT HEALTH INSURANCE PLAN

2026-2027 Policy Year

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1095-B Form

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Geneva College Health Services

Insurance Info for Graduating Students and Dependents

Full-time traditional undergraduate students enrolled in 12 or more credit hours are required to have health insurance while attending Geneva College. Students required to have insurance will be enrolled in the student health insurance plan unless proof of comparable coverage is provided by completing the waiver form.

The 2025-2026 Geneva College Student Health Insurance Plan (SHIP) is underwritten and administered by Wellfleet. The plan includes Cigna's Preferred Provider Organization (PPO). Geneva College has partnered with University Health Plans to administer the plan and help with any waiver, enrollment, or general benefit-related questions. University Health Plans can be reached at 833-251-1722 or [info@univhealthplans.com](mailto:info@univhealthplans.com). For specific benefit-related questions or questions about claims, Wellfleet can be reached at (877) 657-5030.

### Premium and Coverage Periods

	Annual Students	New Spring Students
Coverage Dates	August 1, 2026 – July 31, 2027	January 1, 2027 – July 31, 2027
Insurance Cost	\$2,048	\$1,189
Waiver Deadline	September 11, 2026	January 22, 2027

### Student Enrollment Process

Students planning to use the student health insurance plan should complete the enrollment form in the navigation menu to the left to transfer their information to the insurance company before the deadline. *After the waiver deadline, students who did not submit a form will be automatically enrolled in the SHIP retroactive to August 1, 2025.*

### Waiver Process

Students covered by a comprehensive health insurance plan can opt-out of the SHIP by completing the waiver form in the navigation menu to the left. Before waiving, you are encouraged to compare the cost, coverage, and benefits of the SHIP to your existing plan. Please consider the following:

- Many out of state HMO, EPO, and Medicaid plans do not provide in-network benefits in Pennsylvania leaving you responsible for medical expenses while attending Geneva College
- Many plans do not cover referrals made by Health Services or cover them at a higher cost

If you do not submit a waiver form by the deadline, you will be enrolled in the SHIP and responsible for the premium.

### Dependent Enrollment Process

Eligible students who are enrolled in the SHIP may enroll their eligible dependents by mail. Dependents include your spouse and children under age 26. The dependent enrollment form is located on the navigation menu to the left and must be submitted by the deadline.

### Qualifying Event Enrollment Process

Students who waived the SHIP or did not enroll their dependents during their initial eligibility may qualify for special enrollment rights if they have one of the following life events:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• <u>Life Event</u></li> <li>• Involuntary loss of other coverage</li> <li>• Birth or adoption of child</li> <li>• Marriage</li> </ul> | <ul style="list-style-type: none"> <li>• <u>Documentation Required</u></li> <li>• Letter from your prior insurance carrier</li> <li>• Birth or adoption certificate</li> <li>• Marriage Certificate</li> </ul> |
|---|--|

To request an enrollment form and premium quote, contact university health plans at 800-437-6448 or [info@univhealthplans.com](mailto:info@univhealthplans.com). To enroll, you must submit an enrollment form, documentation, and payment within 31 days of the qualifying event. If all three items are received by the deadline coverage will be effective as of the first day without coverage under your prior plan or the date of birth, adoption, or marriage.

**Waiver Form Login:**

# Geneva College STUDENT HEALTH INSURANCE PLAN

## Annual Waiver Form 2026-2027 Academic Year

Students are required to have comprehensive health insurance while attending Geneva College. If you have other insurance and wish to waive the Geneva College Student Health Insurance Plan, you must document your other coverage each academic year.

Your student ID number is 7 digits and does not include any leading zeros.

TO CONTINUE THE WAIVER PROCESS, PLEASE FILL OUT THE REQUIRED FIELDS BELOW:

Asterisk (\*) denotes required field

date of birth:\*  (MM/DD/YYYY)

student ID:\*

**Waiver Form:**

# Geneva College STUDENT HEALTH INSURANCE PLAN

## Annual Waiver Form 2026-2027 Academic Year

Students are required to have comprehensive health insurance while attending Geneva College. If you have other insurance and wish to waive the Geneva College Student Health Insurance Plan, you must document your other coverage each academic year.

Asterisk (\*) denotes required field

### STUDENT INFORMATION

first name: \*

last name: \*

student ID: \*

email address: \*

date of birth: \*  (MM/DD/YYYY)

### INSURANCE INFORMATION

insurance company name: \*  ?

group number:  ?

policy number:  ?

member ID number: \*

type of insurance: \*

subscriber name: \*

subscriber relation: \*

subscriber city: \*

subscriber state: \*  (Required for US and Canada ONLY)

subscriber country: \*  United States

person completing waiver: \*

your relation to student: \*

I certify this health plan provides coverage through July 31, 2027, or is scheduled to renew and provide coverage through July 31, 2027. If my plan does not renew, I will submit a qualifying event enrollment form and enroll in the SHIP without a gap in coverage.

*I certify that the coverage under this health plan is comparable to coverage under the student health insurance program and I understand I am responsible for my medical expenses once this waiver is submitted. I also certify that my insurance coverage will remain in effect without restrictions providing coverage in Pennsylvania during the academic year 2026-2027. The submission of this waiver form including all information herewith constitutes truthful and accurate statements.*

Please note that once you have completed the process you will receive an immediate message that your transaction was successfully submitted. In addition, you will receive an email confirmation of the submission at the email address you entered on your waiver form. Should you not receive an immediate response, please contact University Health Plans at 833-251-1722 as this would mean you did not successfully waive the Geneva College Student Health Insurance Plan coverage and you will default into the plan if not completed successfully.

Please check your information before clicking on Apply.

Apply

**Waiver Confirmation:**

# Geneva College STUDENT HEALTH INSURANCE PLAN

## Annual Waiver Form 2026-2027 Academic Year

Your waiver form has been submitted. The waiver may take up to 5 business days to post to your student account at Geneva College. Please view your student account to confirm the update.

This insurance waiver will be effective from August 1, 2026, through July 31, 2027. You are responsible for medical expenses once your waiver is submitted and you are responsible for finding providers covered by your insurance plan when you need medical care in PA. A new waiver request must be submitted at the beginning of each academic year.

If you lose your insurance coverage, you qualify for special enrollment rights and you must contact University Health Plans at 833-251-1722 within 31 days of the date you lost coverage to enroll.

Please retain a copy of this confirmation page and reference the confirmation number when contacting University Health Plans if you have any questions concerning this transaction.

Waiver Confirmation Number: 6049296  
Transaction Date: 03/23/2026 09:18:15 PM (ET)

**FOR YOUR SECURITY:** If you are using a shared or public computer, please be sure to close and exit from all browser windows to remove personal information from previous pages stored in the browser's history cache.