

Mandatory Health Insurance Self Service Instructions

Health insurance is required for all SMU students who are enrolled in a minimum of 9 hours and all international students who are enrolled in 1 or more credit hours. The Elect or Waive process must be completed every Fall and Spring of enrollment in the Student Center component of ACCESS.SMU. Students who do not make a selection of Elect or Waive will be automatically enrolled and charged for the Student Health Insurance Plan provided through SMU.

International students will not be able to waive coverage through this process. To waive coverage, international students must contact the Health Center.

If you previously elected or waived coverage and you would like to change your selection, you must contact the Health Center directly within the first 30 days of class. **No election changes permitted after 30 days into a term.**

In Access.SMU, you will be able to: Elect Coverage, Waive Coverage, Update/Change Coverage Information, and view previously Elected/Waived Coverage.

- Log into Access.SMU at <https://access.smu.edu>
- You will be required to use your User ID (SMU ID) and Password and click “Sign In”
- Click on the “Student Center” link in the Student Self Service box
- Click on the Health Insurance push button

Please note: if you don't see this button, it's because you're not currently enrolled in classes and have no history of health insurance enrollment.

Ima Student's Student Center

Academics

Enrollment
[My Class Schedule](#)
[Add a Class](#)
[Drop a Class](#)
[Swap Classes](#)

Academic History
[Grades](#)
[Degree Progress](#)
[Official Transcript](#)
[Unofficial Transcript](#)

This Week's Schedule

Class	Schedule
ADV 2374-002 LEC (5970)	MWF 11:00AM - 11:50AM Owen Fine Arts Center B600
ANTH 2301-801 LEC (2593)	TuTh 12:30PM - 1:20PM Fondren Science Building 0133
ANTH 2301-N18 DIS (6640)	Th 2:00PM - 2:50PM Dallas Hall 0115
ENGL 1301-025 LEC (2723)	MWF 12:00PM - 12:50PM Dallas Hall 0157
MATH 1303-003 LEC (2820)	MWF 3:00PM - 3:50PM Fondren Science Building 0123
PSYC 1300-004 LEC (5881)	MWF 4:00PM - 4:50PM Hyer Hall 0100

SEARCH FOR CLASSES

Holds
 Enrollment Hold [details ▶](#)

HONESTY TUTORIAL

HEALTH INSURANCE

To Do List
 No To Do's. ▶

Enrollment Dates
Enrollment Appointment
 You may begin enrolling for the Spring 2010 Regular session on November 13, 2009. [details](#)

Advisor
 Program Advisor ▶

Finances

My Account
[Account Summary](#)
[My SF eSpace](#)
[Purchase Campus Essentials](#)

Financial Aid
[View Financial Aid](#)
[Accept/Decline Awards](#)

- Select the term that is (open for enrollment) and click “Next”. The following screen will appear:

[Instructions](#)

Welcome Ima Student

SMU is very concerned about the health and well being of all our students. In order to make sure that you have appropriate health care coverage, the Presidents Executive Council passed a Mandatory Health Insurance requirement.

All undergraduate and graduate students taking nine or more credit hours are **REQUIRED** to have health insurance either through the Student Health Insurance Plan or through another individual or family plan. If you have other insurance you must complete the waiver process or you will be **AUTOMATICALLY CHARGED** a premium of \$ xxx .00 for the Spring semester. Details about the Student Health Insurance Plan can be found at <http://www.AHPcare.com/smu>.

Although insurance is not required for students taking less than nine hours or for dependants of students. However, all students are strongly encouraged to have health insurance for themselves and for their dependants. Students enrolled in less than nine credit hours and who wish to obtain coverage through the Student Health Insurance Plan (as well as any student who would like to enroll a dependant) are encouraged to visit <http://www.AHPcare.com/smu>.

The Student Health Insurance is a major medical plan that provides coverage for illnesses and injuries that occur on and off campus. The plan is administered by Academic Health Plans and underwritten by Aetna Student Health.

To View the Student Health Plan benefits, select the link below

<http://www.academichealthplans.com/smu/studenthealthplanbrochure.php>

If you are covered by another insurance plan you will need your current insurance information to complete the process.

CLICK THE BUTTON TO PROCEED TO THE NEXT PAGE

Read through the summary page. Click ‘Next’ to proceed. If this is the first time you are electing or waiving coverage, the following screen will appear:

Ima Student

Choose to Elect or Waive Coverage Step 1 of 4

1 2 3 4 < Previous Next >

A mandatory Health Insurance charge of \$XXXXX for the current term will be billed to your SMU account unless you select the 'waive' button and complete the following waiver form. If you do not have current health insurance coverage you may choose coverage in the student Health Insurance Plan by selecting the 'elect' button below.

Elect Student Health Plan

Waive Student Health Plan

TO ELECT COVERAGE:

- Select the "Elect Student Health Plan" radio button
- Click 'Next'
- A Summary Page will appear confirming the success of the submission.

Please note: You will be billed through Access.SMU. Charges will be applied to your student account

Ima Student

Elect Form Successful **Step 2 of 2**

1 — 2 Next >

You have successfully elected coverage for the Spring 2010 semester.

Insurance Carrier: Academic Health Plans, Inc./ Aetna Life Insurance

Date of Service: 01/04/2010-08/12/2010

Policy #: 474932

Ima Student , SMU ID12345678 , a request has been submitted to Health Services and the Spring premium of \$xxx.00 has been charged to your SMU account. Your request has been submitted to Academic Health Plans, Inc./ Aetna Life Insurance for processing. You should receive your benefits packet containing your insurance ID card from Academic Health Plans, Inc./ Aetna Life Insurance within three weeks. **Failure to receive this packet may indicate your enrollment is not complete. Contact Academic Health Plans, Inc./ Aetna Life Insurance at 1-888-308-7320 if you do not receive your insurance ID card packet.** Insurance packets for students without a valid U.S. address in Access.SMU or that have been returned for inaccurate addresses will be mailed to the Memorial Health Center. To verify if your packet is at the Memorial Health Center contact Krista Pruitt at studenthealthinsurance@smu.edu.

If you wish to change your selection you must contact Health Services. **No waivers will be accepted or reversal of charges made after February 19, 2010.**

If you wish to elect dependent coverage at an additional cost, please call Academic Health Plans, Inc./ Aetna Life Insurance at 1-888-308-7320.

This form is NOT confirmation of enrollment in the Student Health Insurance Plan. The receipt of your insurance ID card from Academic Health Plans, Inc./ Aetna Life Insurance is the only confirmation you will receive that you have been enrolled in the Student Health Insurance Plan.

When you click 'Next' you will be taken back to the Student Center Self Service page

TO WAIVE COVERAGE:

- Select the "Waive Student Health Plan" radio button
- Click 'Next'
- An acknowledgement page will appear.
You will need to check the box accepting the terms and conditions outlined in the waiver. **You will not be able to advance to the next screen if this box is not checked.**

Ima Student

Waive Form Acknowledgement

Step 2 of 4

1
2
3
4

< Previous
Next >

Student Health Insurance Plan Waiver

I request a waiver of participation in the Student Health Insurance Plan. I acknowledge that I am legally responsible for any and all medical expenses during my enrollment at Southern Methodist University and that Southern Methodist University will not be responsible for any medical expenses I may incur. By checking the box below, I attest that the information provided about my insurance coverage is true and correct. I understand that the information is subject to verification and I must maintain coverage throughout the entire semester for which I have been granted a waiver. Should my insurance provider change during the period covered by this waiver, I agree to notify Southern Methodist University of my new insurance provider within thirty days of termination of the coverage provided below. If I fail to maintain insurance coverage I understand that I may be subject to automatic billing for participation in the Student Health Insurance Plan in the amount of \$XXX.XX .

If this request is denied, I understand that my student account will be billed for the Student Health Insurance Plan.

If you would like additional information, please [click here](#) to go to the Frequently Asked Questions Page.

I have read and accepted the terms and conditions outlined in the Student Health Insurance Plan Waiver

- Click 'Next'
- A form will open asking for details of your private insurance company. All fields marked with an asterisk (*) are required. If assistance is needed, you can select the 'click here' link and will be taken to the Frequently Asked Questions page. You will be able to return to this page. Once all required information is entered, click 'Next'.

Ima Student

Waive Form Update

Step 3 of 4

1
2
3
4

< Previous
Next >

Please provide the requested information listed below. If you would like additional information, please [click here](#) to go to the Frequently Asked Questions Page.

I am currently covered by the following health insurance plan:

<u>Insurance Company Information</u>	<u>Policy Holder Information</u>
*Insurance Company: <input style="width: 80%;" type="text"/>	*Name: <input style="width: 80%;" type="text"/>
Insurance Type: <input style="width: 80%;" type="text" value="▼"/>	*Date of Birth: <input style="width: 80%;" type="text" value="31"/>
(HMO, PPO, POS...)	
*Member Services Phone Number: <input style="width: 80%;" type="text"/>	*Group #: <input style="width: 80%;" type="text"/>
	*Subscriber/Member ID #: <input style="width: 80%;" type="text"/>

A summary page will appear letting you know that your submission has been successfully completed. Click 'Next' and you will be taken back to the Student Center Self Service page

Ima Student

Waive Form Successful **Step 4 of 4**

1 2 3 **4** Next >

You have successfully completed the 2009-2010 Student Health Insurance Plan Waiver.

Ima Student SMU ID 12345678. your selection has been submitted to Health Services for the Fall.

You have agreed to notify Southern Methodist University within thirty days of termination of the coverage provided. Failure to do so may result in automatic billing for participation in the Student Health Insurance Plan of \$XXXX.XX.

TO UPDATE/CHANGE COVERAGE INFORMATION:

1. COVERAGE PREVIOUSLY WAIVED – WILL BE LOSING OR HAVE LOST INSURANCE COVERAGE:

If you previously waived coverage and will lose or have lost private insurance coverage, you are required to do the following:

- Click the desired term in which you previously waived coverage
- Click on the 'I have lost/will lose my insurance' button. A box will appear asking for the date the coverage was/will be terminated.
- Enter the date required
- Click 'Next'

Ima Student
Waive Form Changes **Step 1 of 3**

1 2 3 < Previous Next >

<u>Insurance Company Information</u>	<u>Policy Holder Information</u>
Insurance Company: Papari Insurance	Name: John Lukan
Insurance Type (HMO,PPO,POS.): HMO	Date of Birth: 10/26/1945
Member Services: 214/768-7268	Group #: DF9F7DF9D
Phone Number:	Subscriber/ D6F4AFD
	Member ID #:

You have agreed to notify Southern Methodist University within thirty days of termination of the coverage provided. Failure to do so may result in automatic billing for participation in the Student Health Insurance Plan of \$XXXX.XX.

I have lost/will lose my insurance coverage
 My coverage has changed and I need to supply new information

Date coverage terminates/will terminate: 31

- Once the date is entered, you will click 'Next' and a screen will appear letting you know the submission has been successfully completed.
- A member of the Health Center will be contacting you

2. PREVIOUSLY WAIVED COVERAGE – NEED TO UPDATE/CHANGE COVERAGE INFORMATION:

If you previously waived coverage and need to make updates/changes to the information provided, follow these steps:

- Click the desired term in which coverage was previously waived
- Click on the 'My coverage has changed and I need to supply new information' button.
- A form will open asking for details of your private insurance company. All fields marked with an asterisk (*) are required. If assistance is needed, select 'click here' and you will be taken to the Frequently Asked Questions page. You will be able to return to this page. Once all required information is entered, click 'Next'.
- A page will appear letting you know the submission was successful.
- Click 'Next'
- This will take you back to the Student Center Self Service page

TO VIEW PREVIOUSLY ELECTED OR WAIVED COVERAGE:

- Log on to Access.SMU
- Go to Student Center
- Click on the Health Insurance push button
- Select Term you would like to view and Click "Next"