

## UNIVERSITY OF PITTSBURGH STUDENT HEALTH INSURANCE INTERNATIONAL STUDENTS

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## **INTERNATIONAL STUDENT HEALTH INSURANCE OVERVIEW**

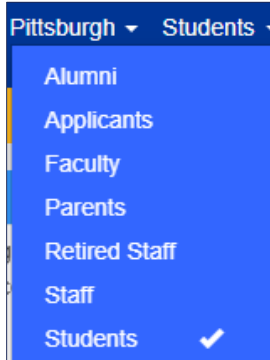
**International students are required to take action during the annual enrollment period.** It is required for international students to have other health insurance or enroll in the university sponsored health insurance.

To take action during the annual enrollment period, start by logging in to the Student Health Insurance Portal by following the steps in the next section.

**International students must submit their enrollment no later than September 30. After September 30, an academic hold will be placed on your account.**

## ACCESS THE STUDENT HEALTH INSURANCE PORTAL VIA MY.PITT.EDU

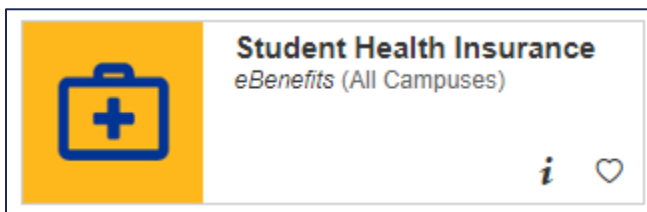
1. Go to my.pitt.edu
2. Select “Students” from the Roles drop-down (located underneath the search bar) if not already selected



3. Search for “Student Health insurance”



4. Find the option for the “Student Health Insurance (*eBenefits*)” and launch the portal, logging in via Pitt Passport (if not logged in)



## COMPLETE THE MANDATORY ENROLLMENT

1. Once you are successfully logged into the Student Health Insurance portal, click “Get Started With Your Enrollment Now, Click Here To Begin”.



2. Select the “Let’s Get Started” button

Please select an option below to enroll:

[Let's Get Started](#) 2021-22 Fall Enrollment - Deadline is Thursday, September 30, 2021 at 11:59 PM Eastern Standard Time

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University of Pittsburgh - Student Insurance - Benefits Statement

**Click on the "Let's Get Started" button above to begin your enrollment process.**

All benefits will provide coverage through August 31 unless you experience a change in your student status. This is regardless of the semester in which you may have started at the University. For additional information, please visit the "Enrollment, Coverage Changes and Payment Info" tab.

Coverage as of  for you and your dependents

No Benefits Summary to display

3. Start your enrollment by clicking the “Start Enrollment” button

2021-22 Fall Enrollment

[Help](#) [Exit](#)

**Helpful Tips for Getting Started**

Step 1 - To get started, please click the **"Begin Enrollment"** link below. To ensure you have an enrollment for every benefit plan, click **"Save & Continue"** on each page. This saves your election if you need to exit before you complete your enrollment.

Step 2 - Next, once your enrollment is completed, you will be able to review your elections before submitting.

Step 3 - If you have no further changes, remember to click the **"Submit Enrollments"** button and initial and submit your elections.

**Note:**

If your elections require payment, you will need to submit payment information for your coverage to take effect. Insurance coverages will not be made effective unless payment information is successfully submitted.

By providing your cell phone number and email address, you authorize UPMC Health Plan to contact you regarding your care, member events, plan information, member surveys, and other insurance products. UPMC Health Plan will deliver these messages by email, text messages (including messages by an automatic telephone dialing system), phone calls, and prerecorded phone calls. Standard message and data rates may apply. You can opt out at any time.

**Chrome is not supported at this time. Please use one of the following supported browsers to make your elections and submit payment.**

**Supported Browsers:**

You can use UPAY with popular browsers like Firefox, Internet Explorer, and Safari when submitting your payment.

[Start Enrollment](#)

As an international student, you must choose one of the following options.

Option to Select	Description of Option
<p><b>1. I am already enrolled in comparable Health Plan coverage outside of the University.</b></p>	<p><i>Choose this option if you are residing in the U.S. but have other insurance.</i></p> <p><i>The following information will need to be provided:</i></p> <ol style="list-style-type: none"> <li><i>1. Insurance Company Name</i></li> <li><i>2. Insurance Company Address</i></li> <li><i>3. Insurance Company Telephone Number</i></li> <li><i>4. Insurance Company Policy or Group Number</i></li> <li><i>5. Effective Date of Coverage</i></li> <li><i>6. Does your insurance policy meet the following minimum coverage requirements: \$50,000 per accident or illness; Medical evacuation in the amount of \$10,000; Repatriation coverage for up to \$7,500; A deductible of no more than \$500 per illness?</i></li> </ol>
<p><b>2. I would like to enroll in the University's coverage.</b></p>	<p><i>Choose this option if you are residing in the U.S. and need the University of Pittsburgh health insurance.</i></p> <p><i>Select the medical plan you would like to enroll in.</i></p>

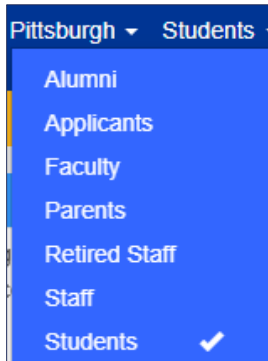
4. Select "Save and Continue."

5. Proceed through the remainder of your enrollment and select "Submit" when finished.

## LIFE EVENTS AND/OR LATE ENROLLMENT REQUESTS

If you need to change your election after the annual enrollment period, this can be done through a Late Enrollment Request.

1. Go to my.pitt.edu
2. Select “Students” from the Roles drop-down (located underneath the search bar) if not already selected



3. Search for “Student Health insurance”



4. Find the option for the “Student Health Insurance (*eBenefits*)” and launch the portal, logging in via Pitt Passport (if not logged in)

5. Select the “Change my Benefits” tab

Home | My Benefits | Personal Information | **Change My Benefits** | Inbox (0) | Benefits Information

Enrollment, Coverage Changes and Payment Info

[Edit](#)

### Life Events

**Information on changing your benefits due to a life event:**

You must have an IRS qualified event in order to change your benefit elections mid-plan-year. Examples under the IRS regulations include: marriage, divorce, change in a spouse/partner's employment, birth of a new baby, and death of a spouse/partner.

- Documentation of the life event, showing the event date, is required.
- If the change you are requesting involves covering a spouse/child, documentation of the relationship such as a marriage certificate, birth certificate, etc. is required.
  - A divorce decree is needed to remove a spouse for that life event.
  - If the changes you are requesting involves the start/termination of another policy, documentation of the coverage type and effective start/termination date is required.
  - Insurance cards are not accepted documentation.
- According to Internal Revenue Service (IRS) regulations, mid-plan-year benefit changes must be submitted within 60 days of the life event.
- **Incomplete submissions will be denied.** If you're still within 60 days of the event, you can submit the request again with all required documentation.



**Steps to take to change your benefits due to a life event:**

In order to make changes to your benefit elections during the academic year due to a life event, you must complete all steps below in their entirety.

1. Choose the appropriate event, enter the date the event occurred and provide an explanation in the "Event Notes" section, and then click the "Submit" button.
  - a. The event that you selected will now appear on the right-hand side of the page.
2. Upload the required supporting documentation.
3. Click the "Enroll Now" button. A new page will open to allow you to make the appropriate changes to your benefit elections.
4. Once you have completed your changes, click the "Submit Enrollments" button at the bottom of the page.

The University's Benefits Department will email you upon approval or denial of your requested benefit change.

6. Complete the event form with the following information:

- Your Event  
*If you are unsure which event to choose, please reference the guide below.*
- Date the Event Occurred
- Enter Event Notes, if applicable

Fill out the form below to register a life event

Your Event *	<input type="radio"/> Birth - COBRA Eligible <input type="radio"/> Child Loss of Dependent Status - COBRA Eligible <input type="radio"/> Death of Dependent <input type="radio"/> Dependent Became Eligible - COBRA Eligible <input type="radio"/> Dependent Became Ineligible - COBRA Eligible <input type="radio"/> Divorce - COBRA Eligible <input type="radio"/> International Student: Graduated program and leaving U.S. - COBRA Eligible <input type="radio"/> Late Enrollment Request - COBRA Eligible <input type="radio"/> Lost Coverage Under Another Plan - COBRA Eligible <input type="radio"/> Married - COBRA Eligible <input type="radio"/> Obtain Coverage Under Another Employer Sponsored Plan
Date the Event Occurred *	<input type="text"/>
Event Notes	<input type="text"/>

Submit Cancel Clear

## Event Guide

Event	Event Details	Documentation Required
<b>Birth</b>	The addition of a child to your family is a qualifying life event to make changes to your benefits enrollment. You must submit a life event in the eBenefits portal within 60 days of the birth or adoption being finalized.	Birth certificate or Legal court ordered document confirming the adoption of child
<b>Death of Dependent</b>	When you experience the loss of a dependent, you may make changes to your benefits. Please submit a life event in the eBenefits portal within 60 days of the passing of your dependent.	Copy of the Death Certificate
<b>Divorce or Married</b>	A change in your marital status, such as marriage or divorce, provides you with the opportunity to make changes to your benefits enrollment. You must submit a life event in the eBenefits portal within 60 days of the marriage date or the date of a divorce being finalized.	Copy of the Divorce Decree or Copy of the Marriage Certificate
<b>International Student: Graduated program and leaving U.S.</b>	Students who graduate and leave the U.S. permanently are able to make changes	Plane ticket and Passport Stamp showing the date you arrived in your home country
<b>Late Enrollment Request</b>	As an international student, you may be eligible to enroll in coverage through a Late Enrollment Request. For example, if you arrived in the U.S. after the annual enrollment period. Choose this event to complete a Late Enrollment Request for review.	Documentation not required. Please explain the reason for your Late Enrollment Request in the Event Notes section.  For example: "Returned to campus and require medical coverage", or "International student requiring insurance"
<b>Lost Coverage Under Another Plan</b>	A loss of coverage through an employer-sponsored plan or state-sponsored program is considered a qualified status change to add you, your spouse, and/or child(ren) to your benefits.	COBRA letter from the former employer, or  Letter from employer's human resources department or insurance company that indicates what coverage(s) are terminating (i.e., medical/dental/vision), covered person(s) and effective termination date of coverage(s), or



Event	Event Details	Documentation Required
		Letter or statement that you/your dependents are no longer eligible for state-sponsored coverage
<b>Obtain Coverage Under Another Employer Sponsored Plan</b>	Gaining coverage through an employer-sponsored plan or state-sponsored program is considered a qualified status change to remove you, your spouse, and/or child(ren) to your benefits.	Confirmation statement of benefits or Letter from employer's human resources department or insurance company that outlines coverages (i.e., medical/dental/vision), enrollee(s), and effective start date of coverage, or  Letter or statement that you/your dependents are newly eligible for state-sponsored coverage.

7. After the Event was added successfully, upload supporting documentation

8. Select "Let's Get Started"

Life Event added successfully.

Registered Life Events

☰ [Late Enrollment Request - COBRA Eligible on 09/02/2020](#)

Please upload supporting documentation for any dependents added to your coverage (birth certificate, marriage license, etc.). The University of Pittsburgh Benefits Department will need to approve your benefit changes and requires this documentation be submitted and approved.

Upload your event documentation and any completed forms.

You must submit valid documentation within 60 days of the event.









Messages:


Attachment:

1 **Enroll**

You must submit your enrollments by 11/01/2020.

9. Enroll in coverage and select “Submit Enrollments”

Medical		
 <b>Pending Submission</b>	Coverage Level: Your Contribution per Month: Tax Status: Carrier Contact Info: Carrier Name:	<b>NEW COVERAGE</b> Panther Blue - Graduate Student Plan <b>Student Only</b> \$370.56 After-Tax UPMC Health Plan <a href="http://www.upmchealthplan.com">http://www.upmchealthplan.com</a> UPMC Health Plan
		<a href="#">Change Enrollment</a>  <a href="#">Opt Out</a> 
Dental		
 <b>Pending Submission</b>	Coverage Level: Your Contribution per Month: Carrier Contact Info: Carrier Name:	<b>NEW COVERAGE</b> Dental Decline/cancel existing coverage \$0.00 United Concordia <a href="http://www.ucci.com">http://www.ucci.com</a> United Concordia
		<a href="#">Change Enrollment</a> 
Vision		
 <b>Pending Submission</b>	Coverage Level: Your Contribution per Month: Tax Status: Carrier Contact Info: Carrier Name:	<b>NEW COVERAGE</b> Vision Plan <b>Student Only</b> \$7.54 After-Tax Davis Vision <a href="http://davisvision.com">http://davisvision.com</a> Davis Vision
		<a href="#">Change Enrollment</a>  <a href="#">Opt Out</a> 
Benefit Elections Grand Total		
Student Total Contribution Per Month: \$378.10		

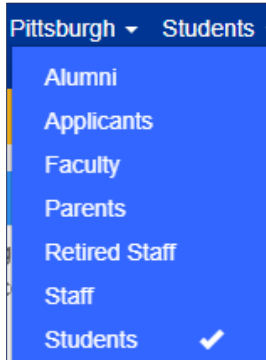
[Submit Enrollments](#) 

[Save and Exit without submitting changes \(You may return later and submit these changes\)](#)

## TERMINATE INSURANCE DUE TO LEAVING THE U.S.

International students can terminate their coverage if they have graduated and are leaving the U.S. permanently.

1. Go to my.pitt.edu
  - *If you no longer have access to the my.pitt.edu portal, please contact eBenefits Member Services at 888-499-6885*
2. Select “Students” from the Roles drop-down (located underneath the search bar) if not already selected



3. Search for “Student Health insurance”



4. Find the option for the “Student Health Insurance (*eBenefits*)” and launch the portal, logging in via Pitt Passport (if not logged in)

Home | My Benefits | Personal Information | Change My Benefits | Inbox (0) | Benefits Information | Enrollment, Coverage Changes and Payment Info

 Edit

### Life Events

**Information on changing your benefits due to a life event:**

You must have an IRS qualified event in order to change your benefit elections mid-plan-year. Examples under the IRS regulations include: marriage, divorce, change in a spouse/partner's employment, birth of a new baby, and death of a spouse/partner.

- Documentation of the life event, showing the event date, is required.
- If the change you are requesting involves covering a spouse/child, documentation of the relationship such as a marriage certificate, birth certificate, etc. is required.
  - A divorce decree is needed to remove a spouse for that life event.
  - If the changes you are requesting involves the start/termination of another policy, documentation of the coverage type and effective start/termination date is required.
  - Insurance cards are not accepted documentation.
- According to Internal Revenue Service (IRS) regulations, mid-plan-year benefit changes must be submitted within 90 days of the life event.
- **Incomplete submissions will be denied.** If you're still within 90 days of the event, you can submit the request again with all required documentation.



**Steps to take to change your benefits due to a life event:**

In order to make changes to your benefit elections during the academic year due to a life event, you must complete all steps below in their entirety.

1. Choose the appropriate event, enter the date the event occurred and provide an explanation in the "Event Notes" section, and then click the "Submit" button.
  - a. The event that you selected will now appear on the right-hand side of the page.
2. Upload the required supporting documentation.
3. Click the "Enroll Now" button. A new page will open to allow you to make the appropriate changes to your benefit elections.
4. Once you have completed your changes, click the "Submit Enrollments" button at the bottom of the page.

The University's Benefits Department will email you upon approval or denial of your requested benefit change.

6. Complete the following form then select "Submit."

- Your Event: International Student: Graduated program and leaving U.S.
- Date the Event Occurred: Enter the date you left the country

Fill out the form below to register a life event

Your Event *	<input type="radio"/> Birth - COBRA Eligible <input type="radio"/> Child Loss of Dependent Status - COBRA Eligible <input type="radio"/> Death of Dependent <input type="radio"/> Dependent Became Eligible - COBRA Eligible <input type="radio"/> Dependent Became Ineligible - COBRA Eligible <input type="radio"/> Divorce - COBRA Eligible <input checked="" type="radio"/> International Student: Graduated program and leaving U.S. - COBRA Eligible <input type="radio"/> Late Enrollment Request - COBRA Eligible <input type="radio"/> Lost Coverage Under Another Plan - COBRA Eligible <input type="radio"/> Married - COBRA Eligible <input type="radio"/> Obtain Coverage Under Another Employer Sponsored Plan
Date the Event Occurred *	<input type="text"/>
Event Notes	<input type="text"/>

7. After the Event was added successfully, upload the following documents:
  - Plane ticket
  - Passport Stamp showing the date you arrived in your home country
8. Select "Let's Get Started"

Life Event added successfully.

Registered Life Events

▣ International Student: Graduated program and leaving U.S. - COBRA Eligible on 09/02/2020

Please upload supporting documentation for Graduates leaving the U.S. The University of Pittsburgh Benefits Department will need to approve your benefit changes and requires this documentation be submitted and approved.

Upload your event documentation and any completed forms.

You must submit valid documentation within 60 days of the event.

Messages:

Attachment:

1 Enroll

You must submit your enrollments by 11/01/2020.

9. Select "Opt Out" for each of the benefits.

Dental

	CURRENT COVERAGE	NEW COVERAGE	
	Plus Dental Plan	Dental	<input type="button" value="Change Enrollment"/>
Coverage Level:	Student Only		<input type="button" value="Opt Out"/>
Your Contribution per Month:	\$16.21		
Tax Status:	After-Tax		
Carrier Contact Info:	United Conoordia <a href="http://www.ucci.com">http://www.ucci.com</a>		
Carrier Name:	United Conoordia		
Effective Date:	09/01/2020		

10. Once you have completed your changes, select the "Submit Enrollments" button

[Save and Exit without submitting changes \(You may return later and submit these changes\)](#)