

# How To Select or Waive Health Insurance

University of Colorado Boulder | <https://mycuinfo.colorado.edu>

Log In
Features
Help

CU Login Name:

IdentiKey Password:

## 2. Go to the Billing Information tab

Academics / Schedule | **Billing Information** | Financial Aid | Dates and Deadlines

Main Campus Balance: \$11,236.89

**Select or Waive Student Health Plans**

- View my enrollment dates
- Projected GPA Calculator
- View my grades
- View my health insurance**

Health Insurance Requirement > Select/Waive Health Insurance

STEP 1 | STEP 2 | STEP 3 | STEP 4

All students are required to have health insurance...

**Automatic Enrollment in Gold Health Insurance**

You can confirm your selection of Gold Plan, Campus Care Supplement, or waive all university coverage by providing proof of health insurance coverage by Friday, September 15, 2017.

Health Insurance Requirement > Health Coverage Options

STEP 1 | STEP 2 | STEP 3 | STEP 4

Your student record shows you have waived coverage for the plan year.

**Health Coverage Options**

- Campus Care Supplement:** This option is recommended for students who already have health insurance but would also like basic primary care coverage on campus.
- Student Health Insurance Plan:** If you don't have health insurance or want comprehensive coverage on campus, you can select the Gold Plan as well as coverage for services in the community and nationally.
- Waive All University Health Plan Coverage:** If you already have health insurance and choose to waive the Campus Care Supplement and the Gold Plan, you can still access Wardenburg Health Center though we will not bill your health plan.

If you choose option 1 or 3 you will need to input your health insurance information on the next screen. Please have your health insurance card ready.

Click here for more information on CU-Boulder's student health plans.

Selection Deadline: Friday, September 15, 2017

<input type="radio"/>	Gold Health Insurance Plan	<a href="http://www.colorado.edu/health/gold">http://www.colorado.edu/health/gold</a>	1995.00
<input type="radio"/>	Campus Care Supplement	<a href="http://www.colorado.edu/health/campuscare">http://www.colorado.edu/health/campuscare</a>	175.00
<input checked="" type="radio"/>	Waive All University Health Plan Coverage	<a href="http://www.colorado.edu/student">http://www.colorado.edu/student</a>	

Health Insurance Requirement > Proof of Health Insurance

STEP 1 | STEP 2 | STEP 3 | STEP 4

Please complete the information below. Most of this information can be found on your insurance card or by calling 1-800-492-5127 with any questions.

**ATTENTION!** This site does not work in Microsoft Edge. If you are unable to complete this page, please use a different browser. Chrome is suggested, Firefox and Internet Explorer 11 work as well.

Enter Plan/Policy coverage date in this format mm/dd/yyyy.

Insured By:

(Name of Insurance Carrier/Military Branch/Medicare/Medicaid/Indigent Program)

If military, indicate branch:

Eligibility Confirmation Number:

(Typically printed on back of the insurance card)

Subscriber Name:

(Name of individual through whom insurance is provided. (example: student, parent/guardian, spouse/domestic partner))

Member ID Number:

(As printed on the insurance card)

Plan/Policy Number:

(if any)

Group Number:

Effective Date:

(Date coverage started)

