

MCPHS UNIVERSITY ▪ QUALIFYING EVENT ENROLLMENT INSTRUCTIONS

If you waived the MCPHS University Student Health Plan for the 2024-2025 Policy Year and your other insurance has terminated, you may use this form to enroll in the Student Health Plan due to your qualifying event. Please Note: You may ONLY enroll due to your qualifying event if you are within 60 days of your termination date.

To enroll, follow each of these steps:

1. **INSURANCE DOCUMENTATION:** Obtain and make a copy of a letter or certificate from your other insurance company that clearly indicates your name and the date that your plan ended or will be ending. If the plan was purchased through an employer, a copy of a letter from the employer on the company's letterhead indicating your name and the date that your plan ended or will be ending will also suffice.
2. **PAYMENT:** A one-time payment for the full prorated enrollment premium must be made to MCPHS through your [MCPHS Student Account Center](#) before completing the enrollment form. Below, please find the prorated premium due for your enrollment. Once you have made payment to MCPHS you will need to save the documentation showing your payment to upload on the enrollment form. Failure to provide documentation of proof of payment will delay processing.
3. **ENROLLMENT FORM:** After you have obtained your insurance documentation and completed payment to MCPHS you will need to enroll by submitting the [Qualifying Event Enrollment Form](#).
4. **ENROLLMENT INSTRUCTIONS:** A copy of your **insurance documentation** and **payment receipt** MUST be uploaded when completing the online enrollment form. Enrollment will NOT be processed without the required documentation being provided.

Read this additional very important information:

5. **EFFECTIVE DATE:** The Student Health Plan will be made effective as of the first date you became or will become uninsured even if that date has already passed, assuming you meet the submission deadline. (Ex. You lost coverage on 12/31/24, your effective date is 1/1/25).
6. **PREMIUM AMOUNT:** Refer to the table below to determine the amount due to MCPHS for your enrollment. If your effective date of coverage is not listed below, please contact University Health Plans at info@univhealthplans.com or 833-251-1707 to request the prorated premium for your effective date.

Effective Date – Your first date you need coverage:	You must pay the corresponding amount below through your MCPHS Student Account Center:
09/01/24	\$3,555.00
10/01/24	\$3,254.00
11/01/24	\$2,953.00
12/01/24	\$2,652.00
01/01/25	\$2,318.00
02/01/25	\$2,017.00
03/01/25	\$1,716.00
04/01/25	\$1,415.00
05/01/25	\$1,082.00
06/01/25	\$782.00
07/01/25	\$481.00

7. **SUBMISSION DEADLINE:** UHP must receive your completed form and insurance documentation by the 60th day following the date of your other insurance plan's termination. Enrollment will not be considered "received" until required documents are provided. Any enrollment request received after the deadline will not be accepted and will be returned to the student and coverage will not be available for purchase.

Important Notice: These instructions and above premium are for student only coverage. Dependent coverage is available for eligible dependents for an additional premium. Please contact University Health Plans to review enrollment eligibility for dependents.

MCPHS Student Account Center: <https://www.mcphs.edu/admission-and-aid/cost-and-aid/account-center-billing-and-payment>

Qualifying Event Enrollment Form: https://www.universityhealthplans.com/secure/enrollment.cgi?group_id=599

University Health Plans: info@univhealthplans.com ▪ 833-251-1707