Procedure to Purchase Health Insurance

Through the Blue Cross Blue Shield Academic HealthPlans Insurance Program

For The University of Texas Health Science Center at Houston

Students and Scholars on J-1/2 visa are required to carry health insurance throughout their participation in the exchange visitor program. Exchange Visitors may enroll through the company of their selection as long as insurance meets minimum standards required by federal regulations, or may utilize the Blue Cross Blue Shield Academic HealthPlans insurance program provided to UTHSC-H students.

Insurance through the Academic HealthPlans program for year 2012-2013 may be purchased either one of three ways:

I. By going to UTHealth Auxiliary Enterprises in person, or
II. By mailing the Enrollment Form with Money Order or check, or
III. By enrolling online with credit card or electronic check

The following pages provide step by step instructions and explain how to enroll...
I. Through UTHealth Auxiliary Enterprises

1. Go to the UTHealth Auxiliary Enterprises office in person

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**UT Auxiliary Enterprises Recreation Center**
7779 Knight Road, 713-500-8420

**Directions from 610 South:**
Exit Fannin and go north towards Reliant Center. Turn right at Holly Hall. Turn left at Knight Rd. Stay on Knight for approx. 1/4 mile - and the Recreation Center is on the right.

- There is a large TMC Entrance sign on the right before the Bob Smith Research Building.
- Follow the road and the Recreation Center entrance and the parking lot is on the right.
- There is an overflow parking lot on the left side.

**Directions from Downtown:**
Take Fannin south until you cross Old Spanish Trail (OST)
- After crossing OST, remain in the left lane. This lane merges into Knight Road.
- The Recreation Center entrance is on the left after passing the UT Police and the Bob Smith Research Building at the TMC Entrance sign, but before the UT apartments. Follow the road and the Recreation Center and the parking lot is on the right. There is an overflow parking lot on the left side.
2. Request assistance from one of their dedicated staff members

Contact Auxiliary Enterprises

Auxiliary Enterprise Phone Numbers

Charles Figari
Vice President and Chief Auxiliary Enterprise Officer
Charles.A.Figari@uth.tmc.edu
713-500-8400
fax 713-500-8402

Lindsey Bradshaw
Senior Support Assistant
Lindsey.Bradshaw@uth.tmc.edu
713-500-8423

Ronda Gillie
Assistant to the Vice President
Ronda.A.Gillie@uth.tmc.edu
713-500-8402

Marcie Zepeda
Staff Assistant
Marcia.Zepeda@uth.tmc.edu
713-500-8407

Location & Driving Directions to Auxiliary Enterprises
II. By Sending the Enrollment Form via Postal Mail

Appropriate Enrollment Form must be sent with money order or check to the insurance company via U.S. postal mail.

Steps:

1. Go to: [https://www.academichealthplans.com/uthouston/2012-2013/](https://www.academichealthplans.com/uthouston/2012-2013/)

2. Select the enrollment form that is appropriate to your coverage needs:

   2.1. The Enrollment Form - Academic Students, is appropriate if you need complete coverage for the first time: health insurance which includes Medical Evacuation and Repatriation: [https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormAcademic.php](https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormAcademic.php)

   2.2. Enrollment Form – Continuation Coverage, is appropriate if you need to continue with complete coverage: health insurance which includes Medical Evacuation and Repatriation: [https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormCon.php](https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormCon.php)

   2.3. Enrollment Form – Annual Standalone AES Repatriation/Evacuation is appropriate if you will enroll for annual coverage and only for Repatriation and Medical Evacuation benefits: [https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormAESAnnual.php](https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormAESAnnual.php)

   2.4. Enrollment Form –Standalone AES Repatriation/Evacuation is appropriate if you will enroll for coverage by semester and only for Repatriation and Medical Evacuation benefits. [https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormAESSem.php](https://www.academichealthplans.com/uthouston/2012-2013/enrollmentFormAESSem.php)
3. Complete the selected Enrollment Form
4. Obtain a Money Order from a bank or a Check payable to Academic HealthPlans in US dollars.
5. Mail the enrollment form along with payment to Academic HealthPlans, PO Box 1605, Colleyville, TX 76034-1605 OR bring it to the Office of International Affairs. As a courtesy we will mail it on behalf of our sponsored J-1 visa holders via certified mail.
6. If you use a credit card you fill out the form and add your credit card information and we can fax it to the Attn: Donna Lange – 817-479-2107
III. By Enrolling On-Line

On-Line enrollment requires having a credit card or being able to send an electronic check via the insurance web page:

Steps:

1. Go to: [https://www.academichealthplans.com/uthouston/2012-2013/](https://www.academichealthplans.com/uthouston/2012-2013/)
2. Select Enroll On Line, and follow screen by screen as prompted:

3. Follow the prompts on each screen:
Enrollment/Coverage Terms & Conditions

1. Coverage Purchase is final. No cancellations or refunds will be issued.
2. Coverage will be effective the date the correct premium is received by the Company, or an authorized representative of the Company or the Effective Date of the coverage period, whichever is later, unless otherwise stated in the Master Policy.
3. Rates are not quoted other than as listed on this website and in the Master Policy.
4. Applicant must meet the eligiility requirements for this coverage as described in the Brochure. If it is later determined that the applicant is not eligible, coverage will be deemed to have not been in force and the premium will be returned.
5. Applicant has read the Brochure and understands all eligibility requirements, benefit descriptions and exclusions explained in the Brochure.
6. FRAUD NOTICE: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, the insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
7. I understand my information is protected by privacy laws and will be released only in accordance with these laws.

I understand and agree to the above conditions.

I Accept
Select the Plan you prefer from the drop down menu:
### Enrollment for: UTHSC at Houston - Academic Students 2012-13

**Select your Student Type**

<table>
<thead>
<tr>
<th>Student Type</th>
<th>Semester Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan I ($100,000 Max Benefit)</td>
<td>12</td>
</tr>
</tbody>
</table>

**Note:**

Make your selection carefully, as you cannot change your coverage after the initial purchase of the plan for the Policy year.
All items in red on the online form must be completed in order to move thru the process.

If you do not have a social security number you can add all 999999999 (must be nine number 9’s)

And if you do not have a Student ID or Employee ID number you can enter your passport number without letters, just the numbers.

Remember to write down your username and password for future use.
You will make your choice here according to the length of your I-20 or DS-2019. You must have coverage for the duration of your visa status.
Select to pay with either:

Credit Card:

*** IMPORTANT NOTE - Remember that throughout the online purchasing experience you must complete each required field in order to complete the purchase. And print your confirmation screen for your records and proof to our office.
Or Electronic Check: