Please note: There is a fee for health insurance included in your tuition and fees. If you do not wish to use the University of Bridgeport’s health insurance, you must have comparable insurance and you must waive out of UB’s health insurance.

INSTRUCTIONS FOR WAIVING HEALTH INSURANCE

FALL DEADLINE: SEPTEMBER 15    SPRING DEADLINE: FEBRUARY 15

1. Please go to www.universityhealthplans.com/ub.
2. In the menu on the left-hand side, Click “Waiver Form”.
3. Read the information on this page and enter your date of birth and student ID at the bottom of the page to access the waiver form. Please insert your full seven (7) digit student ID number (for students with an ID that starts with “0” you must include the “0.” For example, if your student ID was 123456, you would insert 0123456).
4. Input the required information about your insurance plan. Be sure to read each question carefully, if you are unsure of the answer, please stop and verify the information with your insurance carrier or the primary card holder.
5. Read the disclaimer at the bottom of the form and hit apply.
6. Once you have completed the process you will receive an immediate message that your transaction was successfully submitted. Should you not receive an immediate response, please contact University Health Plans at 800-437-6448 as this would mean you did not successfully submit a waiver for the University of Bridgeport Student Health Insurance Plan coverage and you will default into the plan if not completed successfully.
7. All correspondences regarding your waiver should be directed to info@univhealthplans.com. Please be sure to read all correspondence received from this email address.