How to Enroll for the Aetna Student Health Insurance

Graduate

Enroll at www.aetnastudenthealth.com

Follow the attached instructions for coverage beginning August 1, 2021 through July 31, 2022

The cost for coverage August 1, 2021 through July 31, 2022 can be paid in 1 payment or in 2 installments.

See installment schedule

<table>
<thead>
<tr>
<th></th>
<th>Annual Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student</td>
<td>$3,343.00</td>
</tr>
<tr>
<td>Student and Spouse</td>
<td>$6,686.00</td>
</tr>
<tr>
<td>Student and Child</td>
<td>$6,686.00</td>
</tr>
<tr>
<td>Student, Spouse and Child</td>
<td>$10,029.00</td>
</tr>
<tr>
<td>Student and 2 or More Children</td>
<td>$10,029.00</td>
</tr>
<tr>
<td>Student, Spouse and 2 or more Children</td>
<td>$13,372.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Installment 1</th>
<th>Installment 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PAYMENT OF BOTH INSTALLMENTS IS REQUIRED</strong></td>
<td></td>
</tr>
<tr>
<td>Credit Card charged at initial enrollment</td>
<td>Credit Card charged 01/17/2022</td>
</tr>
</tbody>
</table>

Open Enrollment Dates: July 19, 2021 through September 10, 2021
**Step 1  Begin Your Application**

Start here to find your recommended plans.

Welcome to Aetna Student Health. We've made it easier than ever to find the right plan for you, and apply online. Simply answer a few questions to get started.

### Student Information

Are you a domestic student or an international student holding an F-1 or J-1 Visa?
- Domestic

What type of program are you enrolled in?
- Graduate

Choose this option when you are paying with a Credit Card/Debit Card or Check

### Secure Login

<table>
<thead>
<tr>
<th>Field</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hokie Passport Number</td>
<td>Yes</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>Yes</td>
</tr>
</tbody>
</table>

GET STARTED

www.aetnastudenthealth.com
Your plan options are below.

### Medical Plan Enrollment Options

**21/22 Annual Medical Plan – Domestic Students & Dependents**

Undergraduate: 12 or more credit hours. Graduate: 9 or more credit hours. International Students & Veterinary Medicine DVM Students are required to maintain health insurance either through the school sponsored plan or a comparable plan.

- **Select Plan**
- **Add Dependent(s)**

**21/22 Annual Medical Plan - Domestic Dependent Only**

Undergraduate: 12 or more credit hours. Graduate: 9 or more credit hours. International Students & Veterinary Medicine DVM Students are required to maintain health insurance either through the school sponsored plan or a comparable plan.

- **Add Dependent(s)**

### Instructions

- **Student Only**: Choose this option to add your dependents if you have already signed up for the 2021-2022 insurance plan.
- **Add Dependent(s)**: Choose this option to add your dependents to your plan.
- **View Plan Details**: Click here for rates and Plan Details.
Step 3

Your additional plans are listed below

Voluntary (Non-Medical) Options

21/22 Aetna Dental® PPO

With our Aetna Dental® PPO insurance plan, participating dentists may offer discounted rates on additional services such as tooth whitening.

Student Only  
To add Dependent

Click here for rates and plan details

Dental premium must be paid in full at the time of enrollment.
Step 4  Student Information

Please enter your information and click Continue.

We will use this information to mail your ID card and plan materials.
Please Note: Aetna does not mail outside the United States.

Student's Personal Information

- Gender*
  - Male
  - Female
- First Name*
  - test
- Middle Name
- Last Name*
  - tester
- Suffix
  - [Select Suffix]
- Phone*
  - 000-000-0000
- Email*
  - test@vt.edu

Address Information

- Address 1*
  - 123 test lane
- Address 2
- City*
  - Blacksburg
- Country*
  - United States
- State*
  - Virginia
- Postal Code*
  - 24060

Enter all 0's if you don't have a phone number

Enter your local address
Plan Details

Step 5
Please confirm your enrollment selections by selecting the plan term(s) you wish to enroll into and click CONTINUE.

21/22 Annual Medical Plan – Direct Pay Student

<table>
<thead>
<tr>
<th>Student</th>
<th>Plan Term</th>
<th>Effective Dates</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Myself</td>
<td>Annual</td>
<td>08/01/2021 – 07/31/2022</td>
<td>$3,343</td>
</tr>
</tbody>
</table>

☐ By selecting this box I agree to these terms and conditions for the above plan.

Continue with Steps, Submit and Print Confirmation for your records.
# Annual Installment Schedule

## Student Only

<table>
<thead>
<tr>
<th>Installment</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$1685.00</td>
<td>$1658.00</td>
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</table>

## Student & Spouse

<table>
<thead>
<tr>
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<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$3370.00</td>
<td>$3316.00</td>
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</tbody>
</table>

## Student & Child

<table>
<thead>
<tr>
<th>Installment</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$3370.00</td>
<td>$3316.00</td>
</tr>
</tbody>
</table>

## Student, Spouse & Child

<table>
<thead>
<tr>
<th>Installment</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$5055.00</td>
<td>$4974.00</td>
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</tbody>
</table>

## Student & 2 or more Children

<table>
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<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$5055.00</td>
<td>$4974.00</td>
</tr>
</tbody>
</table>

## Student, Spouse & 2+Children

<table>
<thead>
<tr>
<th>Installment</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$6740.00</td>
<td>$6632.00</td>
</tr>
</tbody>
</table>