
Student Health Insurance Plan – Waiver Standards Effective Fall 2026

The University System of Georgia (USG) sponsored injury and sickness Insurance plan will be administered by UnitedHealthcare Student Resources (UHCSR) for the 2026-2027 academic year. The insurance plan is underwritten by UnitedHealthcare Insurance Company. For the upcoming academic year, UHCSR will be enforcing the following waiver standards.

Domestic Student Waiver Standards – Mandatory Categories

In order to be eligible to waive out of the USG SHIP, the student must be enrolled in an [ACA compliant plan](#), which provides in-network access to medical providers for both emergency and non-emergency health care within the State of Georgia.

International Student Waiver Standards

In order to be eligible to waive the student insurance plan, the student's existing insurance plan must meet the following 3 requirements **and** the requirements in either I, II, III, or IV below.

1. Coverage includes effective dates spanning the entire period for which the waiver is requested.
 - **Fall** - 08/01/2026 through 12/31/2026
 - **Spring** - 01/01/2027 through 05/31/2027
 - **Summer**- 06/01/2027 through 07/31/2027
2. Plan must cover Repatriation and Medical Evacuation, or coverage should be purchased separately to supplement the Health Plan used to waive off of the SHIP.
3. If a fully insured plan, the plan must be approved as a health insurance plan by the State Insurance Department (Travel Policies, Disability policies, Hospital Indemnity, Accident Only Policies, and other limited benefit policies are not acceptable).

I. Plan Description

1. Plan is ACA compliant, meaning that the plan is an individual or group insurance plan meeting the requirements of ACA.
 - a. Unlimited Maximum Benefit for covered medical expenses.
 - b. Coverage for essential benefits (with no dollar limits), as defined under the ACA. This includes, but is not limited to:
 - Pharmacy
 - Mental health services on parity with medical services
 - Maternity benefits
 - Preventive care with no cost-sharing for Preferred Providers
 - Coverage for pre-existing condition with no waiting period
 - Pediatric dental and vision coverage
2. Maximum preferred provider total out-of-pocket expenses cannot exceed \$10,150 per member (\$20,300 per family). This amount will be adjusted annually to reflect the then current allowable maximum out-of-pocket.
3. For students with J Visas, waiver eligible coverage must meet the State Department's J Visa Insurance Standards including, but not limited to, the requirement that the plan have a deductible not to exceed \$500.

- II. Coverage is provided under an employer-sponsored group plan that is ACA compliant as described above. In this case, it is likely that the insured may supplement the Health plan with separate Repatriation and Medical Evacuation coverage.

- III. A plan provided to sponsored students (for example: Saudi Arabia Cultural Mission, Kuwait, etc.) that is backed by the full faith and credit of the student's home country may be acceptable. The plans will be reviewed and a determination made regarding comparability to the USG Plan, and if determined to be comparable or better, will be accepted.
- IV. A plan provided by a pre-approved United States Cultural Exchange Program; e.g., Fulbright Programs, etc.

For students in mandatory enrollment categories who wish to waive coverage, the process is as follows:

1. Have your school ID number and current insurance information at hand.
2. Visit StudentCenter.uhcsr.com/[\[SCHOOL URL\]](#)
3. Follow the on-screen prompts and answer the required questions.

It's that simple! When you complete the process, you'll see whether your waiver was accepted or denied.

If denied, you'll also get an email with instructions regarding the appeals process.

If you have any questions, please contact your school's student health insurance plan administrator.

Waiver Appeals FAQ

Q: What should I do if my waiver is denied?

A: If your waiver is denied, you will receive an email from wverification@uhcsr.com with detailed instructions on how to appeal the decision. The email will explain why the waiver did not meet the eligibility requirements and provide step-by-step instructions on how to appeal if you believe the denial was in error. If you disagree with the decision, you can appeal directly via the link provided in the email. Follow the process outlined in the email to submit your appeal, including providing proof that your plan meets the waiver requirements.

If you have additional questions, please contact United Healthcare Student Resources at; Waververification@UHCSR.com.