Voluntary “Non-Student” Health Insurance Process
(To be used for non-registered UC Berkeley Exchange Students)


- **P/Supervisor**: Invites Graduate Student from other institution
- **Home Institution**: Determines eligibility to participate in formal exchange program and coordinates with Host Institution
- **Student**: Student registers and pays the applicable fees and tuition at home institution.
  - Student is responsible for purchasing voluntary non-student health insurance at HOST institution within established deadlines. (30 calendar days of the UC SHIP eligibility period Aug 15 or Jan 15)
  - Student completes the Insurance application form. DOES NOT CHECK any of the Student “Status” boxes. Alongside the student status space - write “STATUS: OTHER”
  - To enroll by phone call (800) 853-5899. Remind Customer Care agent that your status is “OTHER”
  - To enroll by mail send enrollment form and payment to 11017 Cobblerock Dr, Ste 100, Rancho Cordova, CA 95670, attention Janis, Customer Care
- **Third Party Administrator Wells Fargo**: Wells Fargo accepts application and processes payment
- **Third Party Administrator Wells Fargo Issues Insurance**: Issues Insurance
- **Third Party Administrator Wells Fargo**: To enroll by fax send enrollment form to (916) 231-0527
  - Student makes payment via Mastercard or Visa to 3rd party administrator Wells Fargo Insurance Services