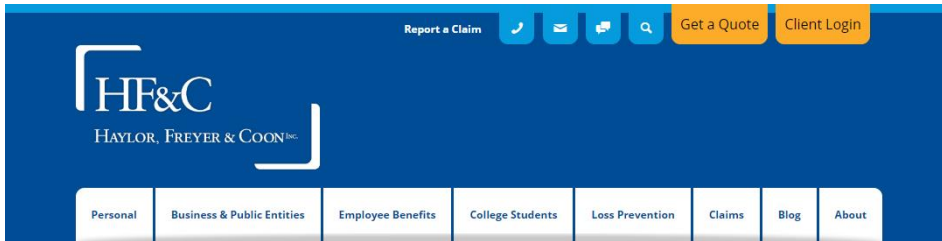


- 1 Visit haylor.com/daemen to ENROLL in the Daemen College Student Health Insurance Plan.



Daemen College



Need Assistance? Please contact our Servicing Broker at 1-866-535-0456 or email student@haylor.com.

Please note that if you are using an older version of Internet Explorer it may not be supported by this website. The best user experience will be found by using [Google Chrome](#), [Edge](#), [Safari](#), [Firefox](#) & [Opera](#).

- 2 Take action on coverage and select Undergraduate or Graduate – Enroll in Daemen Health Insurance.

Student Health

Take Action on Coverage

- Undergraduate - Submit Proof of Insurance (Waive)
- Undergraduate - Enroll In Health Insurance
- Graduate - Submit Proof of Insurance (Waive)
- Graduate - Enroll in Health Insurance
- Download ID Card
- Insurance Plan Highlights 2020-2021
- Find a Doctor
- Master Policy
- Certificate of Coverage



Please note: the annual premiums noted in this overview are subject to change and dependent on age, plan and level of coverage. If you have any questions, please contact Haylor, Freyer & Coon at 866-535-0456 or email student@haylor.com. Contact Health Services for general questions about insurance requirements at 716-839-7380 or health@daemen.edu.

- 3 Verify that you have selected the correct academic level as shown below. If you mistakenly selected the wrong academic level, select the back arrow and make a new selection. Following your selection, enter your last name and student ID*.

Daemen College

Coverage Name
2019-20 Daemen Undergraduate Student Health

Enter Student Last Name
Student Last Name

Enter Student Id
Student Id

Login

← →

Daemen College

Coverage Name
2019-20 Daemen Graduate Student Health

Enter Student Last Name
Student Last Name

Enter Student Id
Student Id

Login

← →

* If you do not know your student ID, visit *Self-Service* on your *MyDaemen* page. Click *username* (example: *dwildcat*) located in the top right corner of the screen. Click *user profile* and your student ID will be located under your photo.

Please note: the annual premiums noted in this overview are subject to change and dependent on age, plan and level of coverage. If you have any questions, please contact Haylor, Freyer & Coon at 866-535-0456 or email student@haylor.com. Contact Health Services for general questions about insurance requirements at 716-839-7380 or health@daemen.edu.

- 4 Review the following release information carefully and take action. Please note, you will not be able to move forward with the enrollment process without selecting “I agree...” If you have questions, utilize the links included for your reference or contact Haylor, Freyer & Coon at 866-535-0456 or email student@haylor.com.

✓ ✓ **Release Form** Student Information Coverage Summary Student Payment Confirmation Sum...

Proof of Insurance (Waiver) Release :

1. If this is being provided on behalf of a minor, the responsible party must accept the release.
2. I confirm that all information furnished by me heron is true and complete to the best of my knowledge.
3. I understand that once I complete this process, my insurance information will be verified for active, comprehensive coverage in the Buffalo, NY area by October 1st, 2019.
4. I understand that uploading a photo of the front/back of your insurance card will assist the insurance company in the event they need to verify information. By choosing not to upload the card, Haylor, Freyer & Coon Inc. reserves the right to contact me and obtain a copy of the card for verification at a later date.
5. I understand that if I do not take action I will automatically be enrolled for the Annual term.

Enrollment Release:

1. I understand that the premium will be added to my student bill for the plan I select.
2. I understand that premiums and coverage information is available at <https://www.haylor.com/college/daemen-college/>

HF&C recognizes that privacy of your personal information is a concern to you. We have established and implemented policies and procedures to protect this information. To learn more about our privacy policies and procedures, you can read our full data use & privacy policy on our website, www.haylor.com

Agreement

I agree to terms and conditions above

I do not agree to terms and conditions above

Submit

- 5 To confirm your previous selection, use the drop down bar to select “**Enroll.**”

ENROLL = students are *enrolling* in the student health insurance plan offered by Daemen College and agreeing to pay the premium (annual cost of coverage). Following enrollment, the premium will be added to the student’s bill.

WAIVE = by submitting proof of active health insurance coverage, a student is *waiving* the student health insurance plan offered by Daemen College.

Take Action on this Coverage

- None -

← →

Please note: the annual premiums noted in this overview are subject to change and dependent on age, plan and level of coverage. If you have any questions, please contact Haylor, Freyer & Coon at 866-535-0456 or email student@haylor.com. Contact Health Services for general questions about insurance requirements at 716-839-7380 or health@daemen.edu.

6 Answer a few questions as noted below to complete the enrollment process.

Take Action on this Coverage

Enroll

Student ID

0238219

School

Daemen College

First Name

Last Name

Breth

Address

City

State

--None--

Zip Code

Phone

Personal Email

School Email

Sex

Male

Date of Birth (MM/DD/YYYY)

Effective Date

- None -

Available Coverage Type

SELECT	NAME	RATE
<input checked="" type="checkbox"/>	2019-20 Undergraduate Student Health	\$185.17

Premium

Submit

Please note, the cost shown is the monthly rate. However, the premium (annual cost of coverage) will be added to the student's bill. If you have questions about payments, please contact the Student Accounts Office at 716-839-8213.

Please note: the annual premiums noted in this overview are subject to change and dependent on age, plan and level of coverage. If you have any questions, please contact Haylor, Freyer & Coon at 866-535-0456 or email student@haylor.com. Contact Health Services for general questions about insurance requirements at 716-839-7380 or health@daemen.edu.

7 Students will be able to view the premium information as shown below.

Student Name
Test Test
School Name
Daemen College
Selected Coverage

NAME	PREMIUM	START DATE	END DATE
2019-20 Undergraduate Student Health	\$2,222.04	Aug 1, 2019	Aug 1, 2020

Total Premium Amount
\$0.00
Premium Amount Owed
\$0.00



The premium (annual cost of coverage) will be added to the student's bill. That is why a student will see \$0.00 for premium amount and amount owed. If you have questions about payments, please contact the Student Accounts Office at 716-839-8213.



8 If enrollment was successful, you will receive an email from Haylor, Freyer & Coon. Additional information on coverage overview, benefits and information to set up an online account and download the UHC StudentResources mobile app will be attached.

Please note: the annual premiums noted in this overview are subject to change and dependent on age, plan and level of coverage. If you have any questions, please contact Haylor, Freyer & Coon at 866-535-0456 or email student@haylor.com. Contact Health Services for general questions about insurance requirements at 716-839-7380 or health@daemen.edu.