

IF YOU DO NOT HAVE HEALTH INSURANCE

- 1) Please fill out the form below to purchase Whitman College Health Insurance.
All students are required to have health insurance for the 2008/2009 academic year.
- 2) The insurance will provide coverage from August 10, 2008 through August 10, 2009.
- 3) The insurance **premium will be automatically charged to your Whitman College student account.**
- 4) **There will be no refunds given after October 31, 2008**, even if you purchase or become eligible for other health insurance after October 31st or if you use the Whitman insurance before October 31st.
- 5) There are two plans available for the Whitman College Health Insurance:
1 - The Base Plan OR 2 - The Catastrophic Plan
- 6) On **June 1st**, full information regarding the 2008/2009 Health Insurance Plan will become available for viewing on the Whitman College Health Center webpage. The Web link for the Health Center is:
http://www.whitman.edu/content/health_center
Make sure that you click the link for the **2008-2009** Student Health Insurance Brochure in the vertical blue menu bar on the left side of the Health Center's home page.

PLEASE FILL OUT THE FOLLOWING INFORMATION IN ORDER TO ENROLL IN THE WHITMAN COLLEGE STUDENT HEALTH INSURANCE PROGRAM:

Name: Last First / /	Whitman College ID#
Date of Birth: day/month/year (i.e. - 29 July 1989)	Social Security #

Please check the desired box below (choose one box only):

<p>BASE PLAN — Full-year coverage — \$50,000 maximum benefit for the year (8/10/08 through 8/10/09)</p>	Cost: \$830/year	<input type="checkbox"/>	S/S \$484	<input type="checkbox"/>
<p>CATASTROPHIC PLAN — Full-year coverage — includes Base Plan + additional catastrophic coverage for a total maximum benefit of \$250,000 for 8/10/08-8/10/09</p>	Cost: \$1,328/year	<input type="checkbox"/>	S/S \$814	<input type="checkbox"/>

Student's signature (Parent's signature if student is under 18 years of age)	Date
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Return completed form to: Whitman College, Welty Center, Student Health Center, Walla Walla, WA 99362. You will NOT be able to FINALIZE your registration for classes if this form is not returned to the Health Center by August 1, 2008.

Please contact us at (509) 527-5281 if you have any questions.

NOTE: The Student Health Center is open and available to all students regardless of their insurance coverage. The Health Center does not bill insurance for services or process insurance claims. We keep the student's insurance information on file solely to assist with outside medical care when incurred by the student.

WELLS FARGO OF CALIFORNIA INSURANCE SERVICES, INC. PRIVACY POLICY

We know that your privacy is important to you and we strive to protect the confidentiality of your non-public information. We do not disclose any non-public personal information about our customers or former customers to anyone, except as permitted or required by law. We believe we maintain appropriate physical, electronic, and procedural safeguards to ensure the security of your non-public personal information. You may obtain a detailed copy of our privacy policy through your school, or by calling us toll-free at (800) 853-3899 or by visiting us at www.wellsfargo.com/studentinsurance.

Student Name: _____ Ins ID#: _____

SUBMIT ALL MEDICAL CLAIMS TO: **Great-West Helathcare**
1000 Great-West Drive
Kennett, MO 63857-3749

CLAIMS ADMINISTRATOR: **AmeriBen/IEC Group**
For questions about benefits, claims and (800)953-1801
Participating Providers.
Group # 0190394

**To locate a Great-West Healthcare provider on the web, visit: www.mygreatwest.com
or call (800) 953-1801.**

PRESCRIPTION DRUG INFORMATION: **Express Scripts**
(866) 247-5008
www.express-scripts.com

THE PLAN ADMINISTERED BY: **Wells Fargo of California**
General Questions **Insurance Services, Inc.**
Student Insurance Division
WA License No. ACORDC*103NL
11017 Cobblersrock Drive, Suite 100
Rancho Cordova, CA 95670
(800) 853-5899 or (916) 231-3399
Fax: (916) 231-3398
www.wellsfargo.com/studnetinsurance

THE UNDERWRITING COMPANY: **Great-West Life & Annuity Insurance Company**

NOTE:

This version of the brochure is controlled by the terms and provisions detailed in the Blanket Accident and Sickness Policy between Whitman College and Great-West Life & Annuity Insurance Company, effective 08-1-2007. Great-West Life & Annuity Insurance Company reserves the right to modify this Brochure subject to changes in the filed policy caused by review by regulatory agencies.