

Student Health Benefits Plan Select / Waive Process – How to Select Coverage

1. Open a browser and navigate to buckeyelink.osu.edu
2. Click on the **Student Health Insurance** link under Popular Links at the bottom of the page.

The screenshot displays the Buckeye Link website interface. At the top, a navigation bar includes 'Students', 'Parents & Families', and 'Staff & Faculty'. The main content area is titled 'Welcome to Buckeye Link' and features several sections: 'Students' with 'Current Students' and 'Prospective Students' options, and 'Popular Links' which lists various services. The 'Student Health Insurance' link is highlighted with a red box. To the right, a 'Quick Links' sidebar lists additional resources like 'My Buckeye Link', 'My To Do List', and 'CarmenCanvas'. Below this, an 'Announcements' section shows a message about no new announcements, and a 'Contact Buckeye Link' section provides contact information and a help link. At the bottom, there are links to download the Buckeye Link app from the App Store and Google Play.

Welcome to Buckeye Link

[Students](#) [Parents & Families](#) [Staff & Faculty](#)

Students

Current Students [SIGN IN](#)

Sign in to view holds, balances, classes, assignments, wellness resources, and much more.

Prospective Students

Sign in to your [Applicant Center](#) to check the status of your application and all requirements.

Popular Links

COMPLETE EVERY YEAR

Authorized Payer Setup
Learn how students are able set up a parent or guardian to make payments on their account.

Student Health Insurance
Select or waive Student Health Insurance coverage.

Student Information Release
Set up permissions so that Ohio State can discuss your account, academic or financial information with an individual(s) other than yourself in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA).

COURSES AND CLASSES

Schedule Planner
Use Schedule Planner to select courses around your schedule.

Add a Class
Add a class or change your schedule.

Class Search (SIS)
Traditional class search for current and upcoming terms.

Quick Links

[My Buckeye Link](#)
[My To Do List](#)
[CarmenCanvas](#)
[Advising Appointments and Notes \(OnCourse\)](#)
[Applicant Center](#)
[My Financial Aid](#)
[Authorized Payer \(Guardian\)](#)
[Admin Buckeye Link \(Staff View\)](#)
[Faculty Center](#)
[BuckeyeLearn](#)
[Workday](#)

Announcements

You're in the clear! No new announcements!

Contact Buckeye Link

[Request help at help.osu.edu](#)

Phone: 614-292-0300

Buckeye Link Office

Ohio State
The Ohio State app is a must-have for all Buckeyes. Use it to catch the next bus, find your way around campus or grab a bite to eat. Don't forget to sign in for personalized features including grades and account balances, personalized news, wellness resources and more.

[Download on the App Store](#)
[GET IT ON Google Play](#)

3. Enter your name.# log in credentials.

4. Click the button next to Select Student Health Insurance Benefits Plan.
5. Select the Academic Terms and click NEXT.
 - a. *Reminder: Once you select the SHI Benefits Plan, your choice stays in place for all terms in the rest of the academic year. You cannot select in autumn and then drop for spring or summer unless you experience a Qualifying Event.*

Select / Waive Coverage

Go To 

Student Health Benefits Plan - Select / Waive

Welcome to the Student Health Benefits Information Center.

Students enrolled at least half-time in a program of study must have health insurance. Before the deadline of your first term each academic year, you can choose the Student Health Benefits Plan ("SHBP") or waive it if you have other medical coverage in place for the academic year. Your choice becomes effective ONLY if you meet credit hour and course type eligibility. Visit shi.osu.edu for eligibility details.

LOOK ON YOUR STATEMENT OF ACCOUNT. You can confirm the status of your choice by confirming the Student Health Benefits Plan fee is on your Statement of Account. Check your fees regularly. Your eligibility may change as you add or drop classes.

If you miss the select/waive deadline, you will remain in the Student Health Benefits Plan for the year.

Please choose an insurance option below

☒ Select Student Health Benefits Plan 


☐ Waive Student Health Benefits Plan (I verify I have other active health insurance for the academic year)

Student Health Insurance Links

[OSU Student Health Insurance](#)

[FAQs](#)

Please select the Academic Term

*Academic Terms: 

Insurance Period: August 19, 2025 to August 17, 2026



[Return To My Buckeye Link](#)

[NEXT >](#)

6. To keep Student Only coverage, click NEXT.

Select / Waive Coverage

Go To 

Student Health Benefits Plan - Selection and Dependents

Academic Terms: AU25, SP26, SU26

Insurance Period: August 19, 2025 to August 17, 2026

Please select coverage level

Insurance Level:






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- If you wish to cover dependents such as a child or spouse, click the Insurance Level drop down menu and select the correct level of coverage.*
- You will be prompted to enter your dependent(s) demographic information. Enter the required information, then click NEXT.*

Select / Waive Coverage

Go To 

Student Health Benefits Plan - Selection and Dependents

Academic Terms: AU25, SP26, SU26

Insurance Period: August 19, 2025 to August 17, 2026

Please select coverage level

Insurance Level:



Please provide dependent information

*Last Name:
*First Name:
Middle Name:
SSN:
*Birthdate: 
*Relationship:
*Legal Sex:



The Affordable Care Act requires the insurer report to the Internal Revenue Service (IRS) the dependent(s) Social Security Number (SSN) to verify they have health insurance coverage.

*Required Fields



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7. Click the CONFIRM button to submit your choice to have the SHI Benefits Plan.

Select / Waive Coverage

Go To

Student Health Benefits Plan - Confirmation

I acknowledge that by submitting this form, I am choosing the Student Health Benefits Plan ("SHBP") for the selected academic term(s).

I understand that my choice is confirmed as effective coverage ONLY if I meet eligibility requirements and the appropriate fee posts to my Statement of Account. (Look at your statement of account for the SHBP fee)

I understand that my eligibility is based on my course enrollment each term.

I understand that my selection, once confirmed, will stay in effect for the full policy year, unless I experience a Qualifying Event, and that my next opportunity to change my insurance selection will be the enrollment period for the first term of the next academic YEAR.

I understand that the information provided herein is confidential. This information will not be made available to any party outside the Student Health Benefit Plan Account Administrator, without my expressed consent.

To complete this process, click the following "Confirm" button once, then wait for your Confirmation Number to appear. This number will replace all your previous confirmation numbers.

CONFIRM

You will be billed for the Student Health Benefits Plan for the selected term(s), assuming you meet the eligibility criteria each academic term.



I DISAGREE

If you do not wish to enroll in the Student Health Benefits Plan, you will need to submit a Waiver.

[Return To My Buckeye Link](#)

8. This Confirmation screen verifies that you completed the Select/Waive process to select the SHI Benefits Plan. **A confirmation email will also be sent to your university email account.**

Select / Waive Coverage

Go To

Student Health Benefits Plan - Confirmation

Coverage Selection: OSU Student Health Insurance
Coverage Level: Student Only
Coverage Period: August 19, 2025 to August 17, 2026
Academic Terms: AU25, SP26, SU26



Printer Format



Remember! It takes 2 business days for changes to be reflected on your Statement of Account.

Your confirmation number is: 001111392



Thank you for completing the Select/Waive process! Please watch your university email for a confirmation of this transaction.

Need to make a change? You can modify your choice by repeating the process in My Buckeye Link prior to the published Select/Waive deadline.

The Select/Waive deadline can be found on our Rates, Dates and Deadlines page at <https://shii.osu.edu/shi-benefits-plan/rates-dates-and-deadlines>.

[Return To My Buckeye Link](#)

NEXT STEPS: Check your Statement of Account to ensure the correct fee appears. If the fee does not appear, you do not have the SHI Benefits Plan.

- a. *If you do not meet the eligible credit hour requirement for the plan, the SHI fee will not post to your Statement of Account.*