

Care26 – UC Voluntary Student Enrollment Guide

Enrollment Steps for Eligible Voluntary Students

Voluntary UCSHIP Enrollment Eligibility

Eligible students who are not automatically enrolled may have the option to elect coverage on a voluntary basis. Eligibility requirements vary so please refer to your university's website for specific details.

To enroll in voluntary UCSHIP coverage, a student:

- Must have been enrolled in UCSHIP in the immediately preceding academic term, and
- Must not exceed program participation limits, including:
 - Filing Fee: Maximum of one term (one semester or one quarter)
 - Leave of Absence (LOA): Maximum of two quarters or one semester

1

If you are eligible, go to students.care26.com/login and enter your school-issued email address to confirm your eligibility and access your account.



Welcome!

Health Insurance System

School Email *

Next

powered by **Care26**

2 Click on Log in using my Account.



[← Change the email](#)

Welcome!

Health Insurance System

School Email *

School *

[Log in using my](#)

[Account](#)



Can't access your school email?
You can recover your account to set up a new login using your personal email.

[Recover Account](#)

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3

Follow the prompts to log in using your school-issued email and password through SSO (single-sign on).

Sign in

ID Number@Test.edu

[Can't access your account?](#)

[Sign-in options](#)

Back

Next

4

From the main dashboard, click on I want to Enroll.

Let's get some coverage!

Please select the option that best applies to you.

I want to Enroll

I need a plan for myself and/or others

Open Enrollment Period:
04/01/2026 12:00 AM - 12/30/2027 11:59 PM

5 Click on the checkboxes to agree to the Terms and Conditions, then click Confirm.

Please read carefully

Please verify the following information before proceeding. If you feel this is incorrect, [let us know](#).

School

Student Category

6 Choose a plan, tell us who it's for, add it to your cart, and Proceed to Checkout.

Select your plan

Pick the coverage that's right for you!

Who is it for?

Select any dependents you would like to add to this plan. Your primary coverage is selected by default.

Cancel Enrollment

Add to Cart

Proceed to checkout

7 Confirm your plan at checkout, choose a payment method, and click Pay Selected Products to complete your purchase. Once your purchase is made you will receive a confirmation email verifying successful payment.

Checkout

Please select a product to see the payment methods available.

Spring/Summer 2026/27 -
Medical

Primary

January 1, 2027 - July 31, 2027

Add more items

Pay selected products

Questions or need help? Visit help.ahpcare.com.