

Graduate Assistant Health Insurance Subsidy

For a USF student receiving University support the cost is \$1,600 annually or \$636 for Fall and \$964 for Spring/Summer. The university will pay a subsidy to offset a portion of the cost for eligible GAs.

The GA subsidy is money USF pays to the insurance company on behalf of eligible GAs to help offset the cost of their medical insurance premiums. The amount of the subsidy was negotiated as part of the Collective Bargaining Agreement and Ratified Reopeners between the university and UFF/Graduate Assistants United. There are 2 tiers of subsidy payments: (1) for GAs with at least a .25 FTE (10 hours per week) appointment and (2) for GAs with at least a .50 FTE (20 hours per week) appointment. If you qualify for the subsidy, the university will make the following contributions toward the cost of your premiums:

Premium Period	Total	.50 GA Portion	.50 USF Portion	.25 GA Portion	.25 USF Portion
Annual Coverage (08/18/10 – 08/17/11)	\$1,600.00	\$0	\$1,600.00	\$600.00	\$1,000.00
Fall Only Coverage (08/18/10 – 01/09/10)	\$636.00	\$0	\$636.00	\$234.00	\$402.00
Spring/Summer Coverage (01/10/10 – 08/17/10)	\$964.00	\$0	\$964.00	\$366.00	\$598.00

To receive the full subsidy you must remain eligible for the entire semester of coverage. The university will **not** make a contribution toward “Summer only” coverage. New GAs who select “Summer only” coverage are responsible for paying the entire premium for that term.

If you are a GA in good standing (including taking the required number of credit hours and maintaining the required GPA in your academic program) with a job code of 9181, 9182, 9183, 9184, 9185 or 9550 and an appointment of at least .25 FTE (10 work hours per week), you are eligible for a USF subsidy of \$1,000 per year. If your appointment is at least .50 FTE (20 hours per week), you are eligible for the USF subsidy of \$1,600 per year (see above for subsidy amounts by semester). You must maintain eligibility throughout each semester for which you are enrolled for the insurance to receive the full subsidy for that semester. You must sign up during Open Enrollment. If you miss Open Enrollment, you will have to wait until the next Open Enrollment period (next semester) to sign up for insurance and receive the subsidy.

Sign up for the USF UnitedHealthcare StudentResources Medical Plan Subsidy:

www.uhcsr.com/usfenrollment Enrollment is open from December 1, 2010 – January 24, 2011.

- **Required fields: Social Security (SSN) and Student ID (U#)**
- Please enter complete Mailing Address including apartment and suite (if applicable). Verify that mailing address is correct. Incomplete mailing address may result in delayed receipt of ID card.
- Enrollment should be completed online as soon as possible to expedite validation and delivery of ID cards. *Coverage is effective 1/10/11.*

Univ. of South Florida - Step 1

If you are enrolling your dependents, please complete a [paper enrollment](#) form and mail it with your payment. Contact Student Health Services with questions. To go to Univ. of South Florida's Student Health Services Web Site, click [here](#).


PRIMARY INSURED INFORMATION

 Social Security # * Student ID
SSN is required for all GTA/GRA/GA. ex : XXXXXXXXX

* First Name Middle Initial
 * Last Name * Gender

- Insured Category – select either Other .25 FTE or Special .50 FTE. **Please do not select Doctoral or any other category.** The subsidy is for .25 FTE or .50 FTE ONLY.

INSURANCE INFORMATION

 * Insurance Policy 2010-363-1

* Insured Category Select One


* Description Select One

Job Code Other-.25 FTE Group

Department Code Regular-Department Payees

* Coverage Period Annual (8/18/2010 - 8/17/2011) [What Premium amount am I responsible for?](#)
[Policy Brochure](#) Special Cov Period (8/2/2010 - 8/17/2011) Medical Students Only

- Description – select either .25 GA or .50 GA. **Please do not select Doctoral.**

 * Insurance Policy 2010-363-1

* Insured Category Regular-Department Payees

* Description NSF Fellows

Job Code Select One

Department Code 25 GA

* Coverage Period Annual (8/18/2010 - 8/17/2011) [What Premium amount am I responsible for?](#)
[Policy Brochure](#) Special Cov Period (8/2/2010 - 8/17/2011) Medical Students Only


- Job Code – 4 digit Job Code will be found on your Employment Offer Letter

INSURANCE INFORMATION

* Insurance Policy 2010-363-1

* Insured Category Select One

* Description Select One

 Job Code Select One

Department Code Select One

* Coverage Period Annual (8/18/2010 - 8/17/2011) [What Premium amount am I responsible for?](#)
[Policy Brochure](#) Special Cov Period (8/2/2010 - 8/17/2011) Medical Students Only

- Department Code –Not Applicable for GAs. Please do not select a Department Code.
- Coverage Period - Please select Spring/Summer (1/10/2011 -8/17/2011).

- Step 2: Payment Method – Payroll Deduction or Credit Card.
- ** .50 GAs - Please select Payroll Deduction. You have no employee portion towards premium.**
- .25 GAs – Select Payroll Deduction or Credit Card. Enrollments with Payroll Deduction will be expedited. .25 GAs will have \$61 deducted per paycheck beginning 2/25/11 (see below).**

Univ. of South Florida - Step 2

The total Premium amount for the coverage you selected is \$1,600.00.
Your credit card will only be charged for the portion of premium that you are responsible for depending on your classification.

Payment Authorization Information

Pay by Payroll Deduction

Pay by Credit Card

Your credit card will not be charged until the coverage you elected and the related premium amount you are responsible for is validated by Univ. of South Florida.

Card Number
Enter without hyphens or spaces.

Card Type Visa MasterCard

Card Expiration
ex. MM/YYYY

Authorized Signature

Date
ex. MM/DD/YYYY

- \$964 Premium will not recalculate or adjust to reflect employee portion until after validation by USF Human Resources. Credit Cards will not be charged until after validation. Validation will be on-going through February 1, 2011.

If you have questions regarding the enrollment process please contact the Student Health Services Insurance Office at (813) 974-5407 or insurance@shs.usf.edu or contact United Healthcare StudentResources at (800) 767-0700.

Graduate/Research/Teaching Assistants with .50 appointments have no employee/GA portion towards the health insurance premium.

Graduate/Research/Teaching Assistants with .25 appointments have a \$366 employee/GA portion towards the health insurance premium. If payroll deduction is selected for employee portion, payroll will be deducted as below:

Pay Period Dates			Pay Dates	.50 FTE		.25 FTE	
Pay Period No.	Pay Period Begin Date	Pay Period End Date	Regular Pay Date	Employee	Employer	Employee	Employer
1113	12/10/10	12/23/10	12/29/10				
1114	12/24/10	01/06/11	01/14/11				
1115	01/07/11	01/20/11	01/28/11				
1116	01/21/11	02/03/11	02/11/11				
1117	02/04/11	02/17/11	02/25/11	\$0.00	\$160.67	\$61.00	\$99.67
1118	02/18/11	03/03/11	03/11/11	\$0.00	\$160.67	\$61.00	\$99.67
1119	03/04/11	03/17/11	03/25/11	\$0.00	\$160.67	\$61.00	\$99.67
1120	03/18/11	03/31/11	04/08/11	\$0.00	\$160.67	\$61.00	\$99.67
1121	04/01/11	04/14/11	04/22/11	\$0.00	\$160.67	\$61.00	\$99.67
1122	04/15/11	04/28/11	05/06/11	\$0.00	\$160.67	\$61.00	\$99.67
				\$0.00	\$964.02	\$366.00	\$598.02

No Deductions

Spring/Summer Premium	Total	.50 GA Portion	.50 USF Portion	.25 GA Portion	.25 USF Portion
	\$964.00	\$0.00	\$964.00	\$366.00	\$598.00