SUBSIDIZED INSURANCE PROGRAM
Quick Reference Guide AY2023-2024

Graduate students that are supported as a Research Assistant (9314), Teaching Assistant (9416), Graduate Assistant – Research Focus (9330), and Graduate Assistant – Teaching Focus (9417), and are receiving a 100% tuition benefit, may be eligible for the University of Utah's Graduate Subsidized Health Insurance Program (GSHIP). The student may hold concurrent positions, which adds up to 100% tuition benefit to qualify. GTs and GRs should only be added to GSHIP if funds are available at the department level to cover the 100% premium cost.

The health insurance is the same Student Health Insurance policy offered to all U students. Dental & Vision coverage is provided through Educators Mutual Insurance (EMI). Coverage for dependents is not subsidized. Rates and brochures are available online (links listed below).

The Graduate School pays the premium at the start of the semester. The Graduate School is then reimbursed via employer payroll deduction from the TA benefit pool, RA benefit allotment, or department activity. For this reason, RA’s must be paid from a grant (5000 fund) that has a benefit allotment for each student researcher. GTs and GRs should only be added to GSHIP if funds are available at the department level to cover 100% of the premium cost.

To add a student to the subsidized insurance program:
Check the insurance box when adding the student to the tuition benefit report. If it is near the TBP deadline and the system is not allowing you to check the box for a particular student, please email the Tuition Benefit team at tuitionbenefit@gradschool.utah.edu. Do not wait until the TBP data entry deadline has passed.

Expediting Coverage:
We are enrolling GSHIP students weekly with UHCSR. However, let us know if you have students needing to be urgently added to the insurance due to a medical emergency. We can expedite enrollment for those students, provided they meet the TBP eligibility criteria.

For questions about international students who wish to waive coverage:
Kerry Hill
801-581-5804
kerry.hill@studenthealth.utah.edu

*International students can only waive coverage if they already have an insurance policy that meets specific requirements. Contact Kerry with questions.

ID Cards:
All students signed up for United HealthCare/EMI should receive two emails approximately 10 business days after enrollment explaining how to set up an online account and print their United Health Care/EMI ID cards. If they do not receive the emails, please have them call the customer service numbers listed on this page.

Dependents of Subsidized Grads:
Health insurance coverage for dependents is not subsidized. Students who wish to add dependents to their policy may do so at any time during the open enrollment period. To add dependents to the health policy, visit www.uhcsr.com/utah, click "Enrollment Info," and then "Dependent Coverage Page."

For EMI, there is a form for subsidized grads to add dependents. Contact us at tuitionbenefit@gradschool.utah.edu

Insurance Carrier Contact Information 2023-24

United HealthCare Student Resources (health)
Website: www.uhcsr.com/utah
Customer Service: 1-800-767-0700
Account Executive: TBD

Educators Mutual Insurance (dental/vision)
Website: Subsidized Grads: TBD
Non-Subsidized and not department-paid: https://emihealth.com/Plans/Group/Plans/uvoluntary
Customer Service: 1-800-662-5851
Account Manager: Jennine Ashley
jashley@emihealth.com (801) 270-2823 Office

For additional information, please refer to https://gradschool.utah.edu/tbp/insurance-information/ Or email us at tuitionbenefit@gradschool.utah.edu.
2023-24 GSHIP Department Portion (100%*)
Fall 2023: $1088.55
Spring/Summer 2024: $1798.25
*Effective Fall 2023 there is no longer a charge to the student for the premium.

For those departments that submit payment directly to UHSCR for their voluntary graduate students:

Most of you have been set up on the Voluntary Enrollment Spreadsheet with a location number specific to your department. Please be careful to use your unique location number in Column D of your spreadsheet. Submit spreadsheets with PHI as the first three letters in your subject to sidpremium@uhcsr.com. You can also request a secure email from sidpremium@uhcsr.com or login at the following URL if you have used UHCSR’s secure system before: https://res.cisco.com/websafe/root. Then you can email your spreadsheet securely to sidpremium@uhcsr.com.

If you have not been set up on the Voluntary Enrollment Spreadsheet, please email us at tuitionbenefit@gradschool.utah.edu with your ORG ID, Department, Contact Name, and Email Address.

Once you receive an invoice from UHC, payment should be submitted to:

"United Healthcare Student Resources"
PO Box 809025, PLANO, TEXAS 75380-9025
Please include a copy of the invoice with the payment.
Include the check’s school year, policy number, option, and invoice number.

If paying for multiple locations or policy numbers, please specify the amount to apply to each location or policy on the check.

For those departments that submit payment directly to EMI for their voluntary graduate students:

EMI's enrollment will all be submitted through their electronic portal this year. Please continue to use your assigned location number.

You will receive an invoice for the Fall and Spring/Summer semesters via EMI's billing portal. Please ensure prompt invoice payment as your student’s coverage may be retroactively removed for non-payment.

Total premium, including health, dental, and vision for 12 months: $

United HealthCare student health insurance policy:

<table>
<thead>
<tr>
<th></th>
<th>Annual</th>
<th>Fall</th>
<th>Spring/Summer</th>
<th>Summer Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premium</td>
<td>$2,720</td>
<td>$1,026</td>
<td>$1,694</td>
<td>$683</td>
</tr>
</tbody>
</table>

EMI Dental: Monthly rate - $9.90***

<table>
<thead>
<tr>
<th></th>
<th>Annual</th>
<th>Fall</th>
<th>Spring/Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premium</td>
<td>$118.80</td>
<td>$44.55</td>
<td>$74.25</td>
</tr>
</tbody>
</table>

EMI/VSP Vision: Monthly rate - $4.00***

<table>
<thead>
<tr>
<th></th>
<th>Annual</th>
<th>Fall</th>
<th>Spring/Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premium</td>
<td>$48.00</td>
<td>$18.00</td>
<td>$30.00</td>
</tr>
</tbody>
</table>

***Students not subsidized or department-paid, who enroll directly with EMI in the dental and vision policies, will pay a slightly higher premium. Rates and enrollment information for that program can be found by visiting studenthealth.utah.edu.