



## SUBSIDIZED INSURANCE PROGRAM

### Quick Reference Guide AY2021-2022

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, with the total adding up to 100% tuition benefit to qualify. GT's and GR's should only be added to GSHIP if there are funds available at the department level to cover the 80% premium cost.

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

Qualifying students are billed for 20% of the premium through Income Accounting. The Graduate School pays the remaining 80% 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. GT's and GR's should only be added to GSHIP if there are funds available at the department level to cover the 80% premium cost.

#### **To add a student to the subsidized insurance program:**

Simply 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](mailto:tuitionbenefit@gradschool.utah.edu). **Do not wait until the TBP data entry deadline has passed.**

#### **Expediting Coverage:**

We are piloting enrolling students on a weekly basis. However, let us know if you have students that need to be added urgently to the insurance due to a medical emergency. We can expedite enrollment for those students.

#### **For questions about international students who wish to waive coverage\*:**

Kerry Hill  
801-581-5804  
[kerry.hill@studenthealth.utah.edu](mailto: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 that are signed up for United HealthCare/EMI should receive two emails approximately 10 business days after enrollment that explains 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](http://www.uhcsr.com/utah), then click on "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](mailto:tuitionbenefit@gradschool.utah.edu)

#### **Insurance Carrier Contact Information 2021-22**

##### **United HealthCare Student Resources (health)**

**Website:** [www.uhcsr.com/utah](http://www.uhcsr.com/utah)  
**Customer Service:** 1-800-767-0700  
**Account Executive:** Wesley Fink  
[wfink@uhcsr.com](mailto:wfink@uhcsr.com)  
800 237-0903 x3472

##### **Educators Mutual Insurance (dental/vision)**

**Website:**  
Subsidized Grads: TBD  
Non-Subsidized and not department-paid:  
<https://emihealth.com/Plans/Group/Plans/uvolutary>  
**Customer Service:** 1-800-662-5851  
**Account Manager:** Jessica Payne  
[jpayne@emihealth.com](mailto:jpayne@emihealth.com)  
(801) 270-2979 Office

**2021-22 GSHIP Student Portion (20%)**

Fall 2021: \$187.30

Spring/Summer 2022: \$308.10

**2021-22 GSHIP Department Portion (80%)**

Fall 2021: \$749.20

Spring/Summer 2022: \$1,232.40

**For those departments that submit payment directly to United HealthCare for some of their voluntary graduate students:**

Most of you have been set up on the Voluntary Enrollment Spreadsheet with a location number that is 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](mailto:sidpremium@uhcsr.com). You can also request a secure email from [sidpremium@uhcsr.com](mailto:sidpremium@uhcsr.com) or login here if you have used their secure system before: <https://res.cisco.com/websafe/root>. Then you can email your spreadsheet securely to [sidpremium@uhcsr.com](mailto:sidpremium@uhcsr.com).

If you have not been set up on the Voluntary Enrollment Spreadsheet, please email us at [tuitionbenefit@gradschool.utah.edu](mailto: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 payment.

Include the school year, policy number, option, and invoice number on the check.

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 some of 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 payment of the invoice as your student's coverage may be retroactive removed for non-payment.

**Full premium, including health, dental, vision for 12 months: \$2,473****United HealthCare student health insurance policy:**

| Annual  | Fall  | Spring/Summer | Summer Only |
|---------|-------|---------------|-------------|
| \$2,269 | \$858 | \$1,411       | \$571       |

**EMI Dental: Monthly rate - \$11.80\*\*\***

| Annual   | Fall    | Spring/Summer |
|----------|---------|---------------|
| \$141.60 | \$53.10 | \$88.50       |

**EMI/VSP Vision: Monthly rate - \$5.20\*\*\***

| Annual  | Fall    | Spring/Summer |
|---------|---------|---------------|
| \$62.40 | \$23.40 | \$39.00       |

\*\*\*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](http://studenthealth.utah.edu).