



Academic Graduate Student Employee Benefits Orientation

Human Resources
Benefits Services





Topics

- Insurance Eligibility
- Insurance Enrollment
- Insurance Cost
- Insurance Plans
- Retirement Plans
- Workplace Injuries



Where do I find information about benefits?

Detailed information and links are available on the Human Resources website:

[Academic Graduate Student Employee Insurance Options](#)



INSURANCE ELIGIBILITY



Who is eligible for benefits?

Academic Graduate Student (AGS) Employees who work in one or more of the following jobs for a total of at least 20 scheduled weekly hours (SWH) and at least 4.5 continuous months (135 calendar days):

- G0045 Assistant Instructor
- G0062 Teaching Assistant – NSC
- G0064 Graduate Tutor
- G0065 Academic Assistant
- G0071 Graduate Assistant
- G0090 Graduate Research Assistant
- G0093 Teaching Assistant Masters
- G0094 Teaching Assistant Doctoral



Who is eligible for benefits?

Your eligible dependents such as your legally married spouse and children (up to age 26) are also eligible for coverage

- You will be required to provide [Evidence of Eligibility](#), which is legal proof of relationship documentation, for each dependent that you enroll in the UT SELECT Medical or optional plans
- You may have to provide documentation for UT SHIP, if requested



INSURANCE ENROLLMENT



What do I need to do prior to enrollment?

- Complete the following onboarding tasks in Workday:
 - Enter Personal and Contact Information
 - Benefits Questionnaire
 - AGS Employee Acknowledgement
- For information about onboarding, refer to the [New Student Employee Checklist](#)
- For additional instruction on entering your personal and contact information in Workday, refer to the [View and Edit Personal Data](#) Workday Instructional Guide



What do I need to do prior to enrollment?

- Once onboarding tasks are completed and final approved, you will be:
 - Automatically enrolled in medical insurance
 - Sent emails confirming your access to the enrollment systems
- To ensure you receive insurance enrollment emails, please add hrsc@austin.utexas.edu, [do-not- reply@ahpcare.com](mailto:do-not-reply@ahpcare.com) and benefits@utsystem.edu to your email safe list



When is coverage effective for AGS?

- Automatically enrolled in the following as of date of hire*:
 - UT Student Health Insurance Plan (UT SHIP, or AcademicBlue)
 - Prime Therapeutics Pharmacy Benefits
 - Premium Sharing Credit
- Must make insurance elections within 31 days of date of hire to:
 - Add optional coverages such as dental, vision, etc.
 - Add dependents
 - Waive UT SHIP and enroll in UT SELECT Medical

**If date of hire is August 16, UT SHIP coverage is retroactively effective August 1.*



How do I enroll in optional coverages?

AGS employees may need to use multiple systems in order to complete their enrollment:

| System | Event | Applicable Plans |
|---|--|---|
| Academic Health Plans Enrollment System | Elect coverage | UT SHIP |
| Academic Health Plans Waiver System | Waive coverage | UT SHIP |
| My UT Benefits | Enrollment system – elect, decline, or view coverage | UT SELECT Medical and all optional plans (dental, vision, etc.) |



Enrollment for AGS

- Complete within 31 days of date of hire
- Determine whether you would like to remain in UT SHIP or change to UT SELECT Medical
- If you want to keep UT SHIP:
 - Enroll dependents* in medical coverage in the [Academic Health Plans Enrollment System](#)
 - Enroll yourself and your dependents in optional coverages such as dental, vision, etc., in [My UT Benefits](#)

**For a July 15 – August 31 date of hire, you must enroll your dependents twice, for both the 2024-2025 and 2025-2026 plan years.*



Enrollment for AGS

- If you want to waive UT SHIP and enroll in the UT SELECT Medical plan:
 - Waive UT SHIP in the [Academic Health Plans Waiver System](#)
 - Enroll yourself and your dependents in UT SELECT Medical and optional coverages such as dental, vision, etc, in [My UT Benefits](#)

**If date of hire is August 16, UT SELECT coverage is effective August 16.*



Can I change my enrollment later?

- There are other enrollment opportunities that allow you to make changes
- Changes due to a qualifying life event (marriage, birth, etc.) must be made within 31 days of the date of the event
- Annual Enrollment occurs each year
 - *UT SELECT and optional plans: July 15 – 31*
 - *UT SHIP: July 15 – September 15*
- For more information about enrollment changes, review [Insurance Enrollment](#)



Am I eligible for summer insurance?

- You may be eligible for summer insurance coverage and will receive additional information about it in February.
- For more information about summer insurance, please review [Summer Insurance Eligibility](#)



INSURANCE COST



How much does UT pay for my premiums?

Benefits eligible AGS employees enrolled in the UT SELECT and UT SHIP medical plans receive funding from the university to offset the cost of their medical plan premiums.

| Insurance Status | UT Select (Premium Sharing) | UT SHIP (Premium Support) |
|-----------------------|-----------------------------------|-----------------------------------|
| Part-time (20-29 SWH) | 50% Employee 25% Dependent(s) | 100% Employee 50% Dependent(s) |
| Full-time (30+ SWH) | 100% Employee 50% Dependent(s) | |



What is my medical insurance cost?

| Level of Coverage | UT SELECT | | UT SHIP |
|-------------------------|---|---|---------------------------------------|
| | Monthly Premium for Part-time Employees | Monthly Premium for Full-time Employees | Monthly Premium for All AGS Employees |
| Subscriber Only | \$421.32 | \$0.00 | \$0.00 |
| Subscriber + Spouse | \$1,004.98 | \$362.82 | \$143.25 |
| Subscriber + Child(ren) | \$942.08 | \$379.46 | \$229.80 |
| Subscriber + Family | \$1,499.28 | \$714.48 | \$373.05 |



What is my optional plan insurance cost?

Premiums for optional plans are available on the [Active Employee Cost Worksheet](#).



How much is the premium sharing credit?

Benefits eligible AGS employees enrolled in UT SHIP, or another non-State of Texas funded health plan, may receive a premium sharing credit to eliminate or reduce their premiums for dental, vision, and AD&D coverage.

| Insurance Status | Monthly Premium Sharing Credit Available |
|-----------------------|--|
| Part-time (20-29 SWH) | \$210.66 |
| Full-time (30+ SWH) | \$421.32 |



How do I pay my premiums?

- You are responsible for the payment of all premiums due
- UT SHIP dependent premiums will be paid directly to Academic Health Plans (AHP) monthly
- UT SELECT Medical and optional plan premiums will be deducted from your paycheck whenever possible
 - If premiums cannot be deducted from your pay, then you will be billed
 - Failure to pay will result in the cancellation of your coverage
 - Check your pay slips monthly and report discrepancies to Human Resources within 31 days
 - You will share responsibility for unreported errors



INSURANCE PLANS



Medical Insurance Options

- Two medical plans:
 - [UT Student Health Insurance Plan](#) (UT SHIP, or AcademicBlue)
 - [UT SELECT](#)
- Both plans:
 - are managed by BlueCross and BlueShield of Texas (BCBSTX)
 - are [Preferred Provider Organizations](#) (PPO)
 - utilize the same Blue Choice nationwide network of providers
 - are gold level plans under the Affordable Care Act (ACA)
 - include [global benefits](#)
- More information on medical plan [comparison chart](#).



Medical Insurance Options

- Designed for two different populations
 - UT SHIP designed for students
 - UT SELECT designed for employees and retirees who may have more complex needs
- Cost and coverage reflects difference in targeted populations
 - UT SHIP has lower premium, but may not provide adequate coverage for those with certain chronic/complex health conditions
 - UT SELECT provides enhanced coverage for chronic/complex health conditions, but premiums and certain out of pocket costs are considerably higher
 - UT SELECT has [different benefits](#) for employees outside of TX, NM, and DC



Plan Terminology

- Annual Deductible
 - Set amount of applicable out-of-pocket expenses you must pay each plan year for covered health care services before the plan pays for benefits
- Co-insurance
 - Medical expenses you and the plan share after deductible has been met each plan year (i.e. you pay 20%, plan pays 80%)



Plan Terminology

- Out-of-Pocket Maximum
 - The maximum you will have to pay for care under the medical and prescription drug plan
 - Includes deductibles, coinsurance, and copays
- Co-payment
 - Set amount you pay for certain medical services and drugs at the time services are rendered
 - Usually paid instead of paying deductible and co-insurance



Medical Plan Comparison

| | UT SELECT | UT SHIP |
|------------------------------|--|---|
| Annual Deductible | \$600 / individual \$1,800 / family | \$350 / individual \$1,050 / family |
| Annual Co-Insurance Maximum | \$5,000 / individual; \$15,000 / family | None. You will continue to pay co-insurance until you reach the annual out-of-pocket maximum. |
| Annual Out-of-Pocket Maximum | \$9,100 / individual; \$18,200 / family | \$8,700 / individual; \$17,400 / family |



Medical Plan Comparison

| | UT SELECT | UT SHIP |
|--|--------------------|-----------------------------------|
| University Health Services (UHS) Visit | \$10 co-pay | No cost |
| Family Care Provider Office Visit | \$30 co-pay | \$30 co-pay |
| Specialist Office Visit | \$50 co-pay | \$35 co-pay |
| Diagnostic Labs & X-rays | Included in co-pay | 20% co-insurance (no cost at UHS) |
| Urgent Care | \$50 co-pay | \$35 co-pay |



Drug Plan Comparison

| | UT SELECT: ExpressScripts | UT SHIP: PrimeTherapeutics |
|-----------------------------------|------------------------------|-------------------------------|
| Annual Deductible | \$200 | None |
| Generic Drugs | \$10 | \$15 |
| Preferred Brand Name Drugs | \$35 | \$30 |
| Non-preferred Brand Name Drugs | \$60 | \$50 |
| Specialty Drugs | Varies | 20% co-insurance |



Medical Plan Comparison

For more information refer to the comprehensive medical and drug plan [comparison chart](#).



Dental Insurance Options

- Three plans:
 - UT SELECT Dental
 - UT SELECT Dental Plus
 - Deltacare Dental HMO
- All three plans managed by Delta Dental
- Both the Dental Basic and Dental Plus plan are PPOs with large provider networks
- DeltaCare is a dental HMO with a very narrow network of providers that requires you to select a primary care dentist
- More information on [Dental – Active Employee Website](#)



Dental Plan Comparison

| | UT SELECT Dental | UT SELECT Dental Plus |
|---|---|---|
| Annual Deductible | \$25 | None |
| Maximum Annual Benefit (per enrollee / plan year) | \$1,250 | \$3,000 |
| Diagnostic and Preventative (exams, cleanings, x-rays) | Plan pays 100% | Plan pays 100% |
| Basic Services (filings, stainless steel crowns) | Plan pays 80% | Plan pays 100% |
| Major Services (crowns, cast restorations) | Plan pays 50% | Plan pays 80% |
| Orthodontic Benefits | Plan pays 50% (\$1,250 lifetime max) | Plan pays 80% (\$3,000 lifetime max) |



Dental Insurance Plan Comparison

DeltaCare USA Dental HMO

- Only available in Texas
- Must select a primary care dentist
- Fewer individual dentist and more dental groups
- Set co-payments
- No annual deductibles and no maximums



Vision Insurance Options

- Two plans:
 - Superior Vision
 - Superior Vision Plus
- More information on [Vision – Active Employee](#) webpage



Vision Plan Comparison

| | Superior Vision | Superior Vision Plus |
|-------------------------------------|-----------------|----------------------|
| Exam | \$35 | \$35 |
| Contact Lens Fitting Fee | \$35 | \$35 |
| Frame Allowance | \$140 | \$165 |
| Polycarbonate Lenses (for children) | Not covered | Covered in full |
| Scratch Coating | Not covered | Covered in full |
| Ultraviolet Coating | Not covered | Covered in full |



Voluntary Term Life Insurance

| | Benefit Amount |
|--------------------------------|--|
| Employee | 1 to 10 times annual salary (up to \$2 million maximum) |
| Dependent | \$10,000 (benefit amount for spouse and each eligible dependent child) |
| Additional Coverage for Spouse | \$15,000 or \$40,000 in addition to the \$10,000 dependent coverage |

- Must be enrolled in employee coverage to elect dependent/spouse coverage
- More information on [Group Term Life Insurance – Active Employee](#) webpage



Voluntary Accidental Death & Dismemberment

| | Benefit Amount |
|-----------------|---|
| Employee | 1 to 10 times your annual salary (up to \$2 million maximum) |
| Dependent child | \$10,000 (per child) |
| Spouse | 1 to 5 times your annual salary (Up to \$1 million maximum) |

- Must be enrolled in employee coverage to elect dependent/spouse coverage
- More information on [AD&D Insurance – Active Employee](#) webpage



Short-Term Disability (STD) Insurance

| | Benefit Amount |
|------------------------|--|
| Weekly Benefit | 60% of weekly earnings up to \$850 per week (subject to reduction due to other income) |
| Elimination Period | 7 days |
| Maximum Period Payable | 22 weeks; 4 weeks for pre-existing conditions |

More information on the [Disability Insurance – Active Employee](#) webpage



Long-Term Disability (LTD) Insurance

| | Benefit Amount |
|------------------------|---|
| Weekly Benefit | 60% of monthly earnings up to \$15,000 per month (subject to reduction due to other income) |
| Elimination Period | 90 days from onset of disability, during which you are continuously disabled |
| Maximum Period Payable | Depends on age at time of disability; generally to age 65 |

More information on the [Disability Insurance – Active Employee](#) webpage



Evidence of Insurability (EOI)

- Health questionnaire that insurers use to determine eligibility for coverage
- Required for 4 to 10 times annual salary for employee life and greater than \$10,000 spouse life at all times
- Required to enroll in or increase life and enroll in disability insurance during Annual Enrollment
- More information on [EOI webpage](#)



Flexible Spending Accounts (UT Flex)

- Allow you to set aside money on a pre-tax basis for eligible healthcare and dependent daycare expenses
- May reduce your taxable income
- More information on [UT Flex – Active Employee](#) webpage



UT Flex Healthcare Account

| | |
|----------------------------|--|
| What can be reimbursed? | Medically necessary health care expenses, including dental and vision related expenses incurred and paid during your period of coverage. |
| How much can I contribute? | \$180 annual minimum; \$3,300 annual maximum |
| How do I get reimbursed? | May use free debit card to pay at time of service, or submit claims for reimbursement through app, online, or by mail |
| When can I get reimbursed? | First day of your enrollment in the plan |
| Last day to incur expenses | November 15 after the end of the plan year |
| Claim filing deadline | November 30 after the end of the plan year |



UT Flex Dependent Care Account

| | |
|----------------------------|--|
| What can be reimbursed? | Care for children under age 13 and disabled dependent so that you or your spouse may attend work or school full-time |
| How much can I contribute? | \$180 annual minimum; \$5,000 annual maximum |
| How do I get reimbursed? | May submit claims for reimbursement through app, online, or by mail |
| When can I get reimbursed? | Each month after your contribution is deducted from your pay and put into your account |
| Last day to incur expenses | August 31 (last day of the plan year) |
| Claim filing deadline | November 30 after the end of the plan year |



RETIREMENT PLANS



Can I participate in a retirement plan?

Tax Sheltered Annuity (TSA)

- Available to all employees
- Pre and post-tax options
- Monthly payroll deduction
- Minimum contribution of \$15 per month
- Penalty for early withdrawal prior to age 59.5
- May enroll/change/stop at any time

Deferred Compensation Plan (DCP)

- Available to all employees
- Pre and post-tax options
- Monthly payroll deduction
- Minimum contribution of \$15 per month
- No early withdrawal penalty
- May enroll/change/stop at any time



How do I enroll in a retirement plan?

- UT Retirement Manager allows you to start, stop, or change contributions to voluntary retirement plans at any time
- It also allows you to change provider allocations at any time
- Changes made by the 14th of the month will be effective that month
- Click *Login* → *Participant Login* → *First Time User? Get Started* at <https://www.myretirementmanager.com>
- Your employer = UT Austin



Which retirement providers are available?



For more information about UT Saver Voluntary Retirement Programs, visit the [Retirement Program Options](#) webpage.



WORKPLACE INJURIES



What should I do if I am injured on the job?

- Report it to your supervisor immediately
- Seek care if desired
- Complete and submit all required paperwork within 48 hours
- For paperwork and additional information visit the [Workers' Compensation Insurance](#) webpage



HR Resources

HR Service Center

hrsc@austin.utexas.edu

(512) 471-4772

Questions about insurance or retirement.

HR Leave Management

hrs-lm@austin.utexas.edu

(512) 471-4772

Questions about workplace injuries.