



Waiver of Medical Coverage

(This is a sworn statement and must be done annually)

Name: _____ Employee ID: _____
Last First M.I.

Campus Address: _____ Work Phone: _____

Name of Spouse: _____

- Check here if your spouse or civil union partner is an employee of UVM.
- Check here if you are employed by and have medical coverage with FAHC.

Name and Age of Other Dependents: _____

Employer (other than UVM) providing group health coverage: _____

Insurance Carrier for other group health coverage: _____

Please provide a photocopy of your group ID card or other evidence of medical insurance coverage.

I hereby elect to receive \$1,000* in lieu of coverage under the University of Vermont's group health plan and swear that all of my dependents and I are covered by the group health coverage described above. I hereby waive for myself and my dependents group health coverage under the University of Vermont's group health plan. I understand that I will **not** be allowed to change this election until the next annual open enrollment unless there is a change in my family status as defined by the IRS and described in the FSA Summary Plan Descriptions booklet. I acknowledge that my waiver of medical coverage will be paid to me on a prorated basis,** based on how many paychecks I receive during the calendar year. This waiver will remain in effect until I rescind it by applying for medical coverage within 30 days of losing my medical coverage with my other insurance carrier.

An employee with a spouse or civil union partner who works at the University is not eligible for this waiver of medical coverage.

Sworn Signature: _____ **Date:** _____

* You are **not** eligible for the \$1,000 waiver if any one of the following is true:

- your spouse is also an employee of the University of Vermont
- you or your dependents have Medicare or Medicaid
- you or your dependents are on COBRA
- you or your dependents have an individual plan
- you are employed by and have medical coverage with Fletcher Allen Health Care

** The \$1,000 waiver is prorated based on the length of time actually employed during the calendar year.