University of South Florida (USF) employees who meet the eligibility requirements may participate in the Domestic Partnership Health Insurance Stipend Program to assist in defraying the cost of health insurance for a domestic partner. The program is intended to provide individuals with domestic partners a similar coverage level as those with family coverage (to include self, partner and the employee’s dependent child (ren)). The amount of the stipend will be the lesser of: (1) the difference between the university’s contribution for “individual only” coverage in the State of Florida health plan and the university contribution for “family” coverage for that plan, or (2) the actual cost of the domestic partner’s own individual health insurance coverage. The stipend may be adjusted when changes are made in the employee’s coverage selection or to the amount of university contribution to the USF health insurance. The stipend amount may also be adjusted at the sole discretion of the university based on availability of program funding. Employees on contracts and grants shall be eligible for the stipend, provided funding for this purpose is permitted and adequate funds are available by the terms of the contract or grant and the rules of the funding agency. The stipend will be paid to participating eligible USF employees on a monthly basis.

**Eligibility**

For the purposes of this program, a domestic partner is defined as an individual who shares a committed, mutually dependent relationship with a USF employee.

In order to be eligible for the domestic partnership health insurance stipend, the USF employee must be in a benefits eligible position, be enrolled in the health insurance program with USF, and both the employee and the domestic partner must complete a Domestic Partnership Declaration form and attest that:

- They are at least 18 years of age and are mentally competent to consent to a contract.
- They are not legally married to anyone else and are not related to each other.
- They have shared financial responsibilities for at least the past six months.
- The non-employee domestic partner is not employed or is not eligible for health benefits through his or her employer.
- Health insurance coverage is in effect for the domestic partner and coverage shall be maintained during any period for which the domestic partnership health insurance stipend is paid.

**Insurance Eligibility**

The Domestic Partnership Health Stipend Program was designed to provide monetary assistance to any benefit eligible USF employee and their domestic partner to offset the costs associated with purchasing an individual health insurance policy where no other plan is available. Any medical plan that is associated with or offered through an employer will not be considered as eligible insurance to be reimbursed by the program. This includes but is not limited to employer-sponsored plans and student plans. COBRA coverage is eligible for the stipend.

The stipend will only cover eligible costs associated with a health plan. Dental and Vision plans are not eligible for reimbursement via the health insurance stipend.

**Required Documentation**

The USF employee must submit documentation showing the employee’s domestic partner, if employed, is not provided health insurance coverage or is not eligible for coverage by the available
plan provided by his or her employer as attested on the Domestic Partnership Declaration form. In addition, proof of the domestic partner’s health insurance coverage and premium payment must be sent to Human Resources at initial enrollment in the domestic partnership stipend program and on a quarterly basis by February 15th, May 15th, August 15th, and November 15th of each year.

Additionally, documentation of at least three of the following must be submitted with the Domestic Partnership Declaration form to support the domestic partner relationship:

- Domestic Partner card
- Joint ownership of real property
- Mutual designation as attorney in a durable power of attorney document
- Joint ownership of personal property or assets, such as automobiles or stock
- Designation of health care surrogate
- Joint bank account
- Driver’s license or tax documents showing the same address
- Joint consumer or bank loan
- Joint credit cards
- Joint lease
- Designation of beneficiary for life insurance, retirement plan, and/or last will and testament
- Legal documentation demonstrating joint adoption or legal guardianship of any dependents, whether children or adults

**Recordkeeping**

At USF, benefit elections are treated with the highest degree of sensitivity. Information about employee participation in the Domestic Partnership Health Insurance Stipend Program will be subject to and maintained according to the same internal processes and protocols for all sensitive employee information. However, as with most information contained in employee personnel files, this information may be accessible under Florida public record law.

**Tax Implications**

The amount of the cash stipend is taxable to the employee and subject to FICA and income tax withholding. It will be paid and taxed separately from regular pay. This payment will not count toward retirement, life insurance or any other benefits.

**Enrollment Procedures**

An employee who wishes to participate in the Domestic Partnership Health Insurance Stipend Program must submit the completed Domestic Partnership Declaration form to the Human Resources office of the employee’s institution along with the attestations of the employee and domestic partner and other required documentation, including proof of the domestic partner’s individual health insurance coverage and premium payment.

**Participation Procedures**
If all documentation is received prior to the 15th of the month, upon verification of the domestic partnership status, payment of the stipend to the employee will be made on the first pay date of the following month.

Once the domestic partnership health insurance stipend is approved, the employee must submit documentation of the domestic partner's health insurance coverage and premium payment to Human Resources on a quarterly basis. USF may terminate the health insurance stipend if the employee does not provide proof of continued health insurance coverage for the domestic partner. Payments will not be retroactive; therefore, if a stipend payment is not made for any time period due to lack of documentation, the stipend is forfeited for that period.

**Termination of Domestic Partnership Stipend Eligibility**

An employee receiving the domestic partnership health insurance stipend shall notify Human Resources immediately, but no later than 15 days, upon one of the following conditions via completion and submission of the Termination of Domestic Partnership Stipend Eligibility form to Human Resources: (1) termination of the domestic partnership for which participation has been approved; (2) the domestic partner becomes eligible for health insurance through his or her employer; (3) death of the domestic partner; or (4) termination of employment by the USF System employee.

The employee must wait six months from the date of termination of a domestic partnership before applying for another domestic partnership health insurance stipend, unless the employee is registering the same domestic partnership by completing another Domestic Partnership Declaration form.

An employee who knowingly makes false statements about satisfying the eligibility criteria or fails to notify Human Resources of a change in domestic partnership status may be subject to disciplinary action up to and including discharge. USF reserves the right to modify or discontinue this program at any time at its discretion, with or without advance notice.

**Repayment**

Any stipend received after eligibility has terminated, or should have terminated, must be repaid to USF. This may be deducted from future pay.