



HEALTHCARE POLICY & BENEFIT SERVICES DIVISION

RETIREE HEALTH FUND CONTRIBUTION
ADJUNCT FACULTY

FORM REQUIRES DATA FROM AGENCY HUMAN RESOURCES AND OSC

CO-1323 (Rev. 12/2019)

Part I- General Information - Adjunct Faculty member qualifying for retiree health benefits

Adjunct faculty members with sufficient service to qualify for retiree health benefits are obligated to contribute to the Retiree Health Fund on the same basis as full-time healthcare-eligible employees, taking into account date of hire, service accruals, and total compensation earned during semesters of healthcare-eligible service.

EMPLOYEE INFORMATION table with fields: Last Name, First Name, Middle Initial, Employee Number, Street Address, City, State, Zip Code, Home Telephone No., Date of Hire, Date of Birth, Retirement Date, Personal E-Mail, Medicare Eligible?, Spousal Medicare Eligibility?, Name & Address of Employing Agency, Department ID, Retirement Plan.

SERVICE RECORD table with columns: Semesters in which member taught at least 9 Credit Hours, Compensation subject to Contribution, Required Contribution (% and Amount).

AGENCY SECTION table with fields: PAYMENT METHOD, INSTALLMENT START DATE, INSTALLMENT END DATE.

EMPLOYEE ACKNOWLEDGMENT: I understand that payment of the above amount is a condition of my receiving retiree health benefits from the State of Connecticut. I authorize the Office of the State Comptroller to deduct the above installment from my State of Connecticut pension benefit or from the Medicare B reimbursements to which I am entitled until the required contribution is paid in full.

EMPLOYEE SIGNATURE and DATE fields.

AGENCY CERTIFICATION: I hereby certify that all the information on this application has been verified and is correct.

AUTHORIZED AGENCY SIGNATURE, TITLE, DATE fields.

AGENCY CONTACT (PRINT NAME), Agency Contact Telephone, Agency Contact E mail fields.

Return completed form to OSC, Employee Benefits Unit, 165 Capitol Avenue, Hartford, CT 06106



### Instructions for Completing CO-1323

**Employee:** In collaboration with your agency, list all semesters in which you worked sufficient hours to obtain active health benefits (0.5 FTE). (May include semesters in which your combined service at multiple institutions exceeded 9 credit hours.) Attach a second sheet if necessary. Fill out all remaining portions of the Employee section and indicate whether you (and your spouse, if applicable) are currently eligible for Medicare.

**Agency:** Send information regarding adjunct's healthcare-eligible service to [osc.opeb@ct.gov](mailto:osc.opeb@ct.gov) to obtain calculation of adjunct's compensation and Retiree Health Fund contribution amount.

**OSC:** The Employee Benefits Unit of the Healthcare Policy & Benefit Services Division will run a query to determine the compensation on which the Retiree Health Fund contribution will be based. The contribution to the Retiree Health Fund will be calculated using the same rules as are applicable to a full time employee with the same hire date, service accrual and retirement plan membership as the adjunct. **Only those semesters in which the adjunct was eligible for health benefits and would have been required to contribute to the Retiree Health Fund if she/she had been a full-time employee should be counted.**

Code	Percentage	Applicable to
OPEB	3%	Employees required to contribute under SEBAC 2009 (less than 5 years actual service as of 7/1/2012, new hires post-7/1/2009 and post-7/1/2011 rehires)
OPE2	0.5% 7/2013 to 6/2014	Healthcare-eligible members of SERS and ARP not required to contribute under SEBAC 2009, excludes post-7/1/2011 rehires
	2% 7/2014 to 6/2015	
	3% 7/2015 and after	
OTRS	1.75%	TRS members required to contribute under SEBAC 2009, this rate effective 10/07/11 (prior to that date TRS members paid 3%) includes post-7/1/2011 rehires
OTR2	0.0% 7/2013 to 6/2014	Healthcare-eligible state employee members of the TRS who are not required to contribute under SEBAC 2009, excludes post-7/1/2011 rehires
	0.75% 7/2014 to 6/2015	
	1.75% 7/2015 and after	

**Agency:** After OSC advises the agency of the required contribution, the agency will make arrangements with the employee for payment of the amount due. Unless the Retiree Health Fund contributions are paid, the adjunct will not be enrolled in retiree health coverage. If payments are not made timely, the adjuncts coverage may be subject to suspension. If there are questions concerning completion of this form call the OSC Employee Benefits Unit, Healthcare Policy & Benefit Services Division at 860-702-3543.