



2023 HEALTHCARE SUBSIDY FORM

New Enrollment Change

SECTION 1: To be completed by Fellow (within 10 days after appointment begins)

Last Name	First Name	
Address		
City	State	Zip
Home Phone	Work Phone	
Department	Date of Hire	

Health Enrollment Elections (please check one):

- Yale Health Plan
 Aetna Choice POS II
 Aetna Smart Care Plan
 Legacy Aetna POS II
 Employee
 Employee + Child(ren)
 Employee + Spouse
 Family

SECTION 2: To be completed by Department

Departmental Authorization to Subsidize MEDICAL Coverage for Fellows (select one):

OPTION 1 Yale Health Plan Full Cost*:
 SINGLE \$885
 EMPLOYEE + CHILD(REN) \$1682
 EMPLOYEE + SPOUSE \$1859
 FAMILY \$2655

OPTION 2 Legacy Aetna Choice POS II Full Cost*:
 SINGLE \$1430
 EMPLOYEE + CHILD(REN) \$2717
 EMPLOYEE + SPOUSE \$3003
 FAMILY \$4290

OPTION 3 Aetna Choice POS II Full Cost*:
 SINGLE \$1139
 EMPLOYEE + CHILD(REN) \$2164
 EMPLOYEE + SPOUSE \$2392
 FAMILY \$3417

OPTION 4 Aetna Smart Care Plan Full Cost*:
 SINGLE \$778
 EMPLOYEE + CHILD(REN) \$1458
 EMPLOYEE + SPOUSE \$1604
 FAMILY \$2284

OPTION 5 OTHER* (Please select if you elect to subsidize Aetna coverage at the Yale Health Rate or another flat amount)
 Flat Monthly Amount of \$ _____

***All rates are subject to increases at the start of the calendar year.**

REMINDER:

The election indicated above is to be charged to the grant COA(s) and/or to department COA(s). "PDF Sub" earning should be scheduled at the worker position earning level when assigning Costing Allocations. If the worker position earning level schedule is not assigned it will be charged to the worker position level COA(s). Any premium difference for the medical coverage elected by the Fellow will be charged directly to the Fellows stipend check.

DEPARTMENT** : _____

SUBSIDY START DATE: _____ SUBSIDY END DATE: _____

Authorized by: (print full name) _____ Tel # _____

Signature: _____ Date: _____

****PLEASE AUTHORIZE AND SUBMIT TO YOUR DEPARTMENT BY THE 15TH OF THE MONTH IN WHICH THE POSTDOCTORAL FELLOW'S APPOINTMENT BEGINS.**