



Office of Human Resources

Adjunct Group Benefits Program Agreement

I am enrolled in the Employees Retirement System of Texas (ERS) Group Benefits Program (GBP) through Austin Community College District (ACC) for the Adjunct Group Benefits Program (AGBP). I elect to pay my monthly premiums by either “Payroll Deduction for 9-Months” or “Personal (Direct) Payments for 12 Months”. (Please indicate election below with an “X”.)

_____ **I. Payroll Deduction for 9-Months**

I understand that my premiums will be payroll deducted for 9 months (September – May), and that coverage will be from September 2011 through August 2012.

- If a 90-day waiting period applies, premiums will be deducted for 6 months (December – May) with coverage from December through August.
- I understand that for each month in which no ACC paycheck is to be received, premium payment must be submitted at any ACC Cashier’s Office by the 10th of the coverage month (for example, payment by September 10th for the premiums due for coverage in the month of September.) If, however, my personal ACC paycheck is insufficient to cover the total monthly premiums due, I understand that I am responsible for submitting the remaining premium balance at any ACC Cashier’s Office by the 10th of the following month.
- Payments may be made by cash, check (personal or cashier’s), money order or debit/credit card.
- Please provide your ACC ID# and AGBP to the Cashier to ensure proper recording of the payment.

OR

_____ **II. Personal (Direct) Payments for 12 Months**

Personal payment by cash, check (personal or cashier’s), money order or debit/credit card must be submitted at any ACC Cashier’s Office by the 10th of each month (for example, payment by September 10th for the premiums due for coverage in the month of September).

- If payment is not received by the 10th of each month, benefits will be automatically cancelled at the end of the last fully-paid month.
- Please provide your ACC ID# and AGBP to the Cashier to ensure proper recording of the payment.
- This option is an “after-tax” payment and does not qualify for pre-tax benefits.
- Once benefits are cancelled due to non-payment, they will not be restored.

Authorization:

Carefully read the statement below, then sign, date and return the completed form to ACC Human Resources Benefits. If this document is not signed and returned, **you will automatically be enrolled in the Personal (Direct) Payments for 12 Months** in accordance with Section II. above. (Please read.)

I understand that I will receive a notice if my pay is insufficient to cover all premiums. If I do not respond to the notification by making the necessary Personal (Direct) Payment within the specified time, my entire GBP coverage will be cancelled. I will still owe ACC the insufficient funds amount, because coverage was in place, even if services were not accessed. Any collection fees will be my responsibility. I approve a payroll deduction from any future paycheck to cover any amount owed for benefits. I understand that I must submit the required payments by the 10th of each month. I understand that if the premium amount is not paid for any given month, the insurance will be automatically cancelled at the end of the last fully-paid month. ACC is not responsible for employee coverage selections or payment of premiums.

Employee’s PRINTED name

ACC ID#

Employee’s signature

Date