



## Health, Dental, Vision, Life, & Supplemental Insurances

	INSURANCE ENROLLMENT	INSURANCE DOCUMENTS NEEDED	INSURANCE PREMIUMS	INSURANCE ID CARDS
<b>DEADLINE</b>	60 days from hire date	2 calendar months following enrollment	Immediately	Mailed after insurance effective date
<b>ENROLLMENT/ FORMS</b>	<p><b>ONLINE:</b>  <a href="https://peoplefirst.myflorida.com">https://peoplefirst.myflorida.com</a>  <b>TELEPHONE:</b> 1-866-663-4735  <b>MAIL:</b> Download enrollment forms from the People First website, return to:            People First Service Center            P.O. Box 6830            Tallahassee, FL 32314            Or  <b>FAX:</b>            1-800-422-3128</p> <p><b>APPLIES TO:</b>            Health            Life            Dental            Vision            Supplemental  <i>*Excluding GABOR Policies below</i></p>	<p><b>Health Only</b>  <b>HIPAA LETTER:</b>            *BCBS State PPO only. For Preexisting conditions (needed for you or dependents)  <b>Dependent Eligibility</b>-applies to all insurance plans  <b>BIRTH CERTIFICATE COPY:</b> *For children only.  <b>MARRIAGE LICENSE COPY:</b>            *For Spouse.</p>	<p><b>Health Only</b>            Personal check or money order            *Write People First ID on memo line. Make payable to Division of State Group Insurance (DSGI).</p>	<p><b>Health &amp; Dental Only</b>            People First must receive premium prior to insurance carrier sending health and dental ID card(s).</p>
<b>RETURN TO:</b>	<b>People First Service Center</b>	<b>People First Service Center</b>	People First P.O. Box 863477 Orlando, FL 32886-3477	Will be sent to mailing address on record.

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UCF Benefits Section  
 407-823-2771  
[benefits@ucf.edu](mailto:benefits@ucf.edu)  
[www.hr.ucf.edu](http://www.hr.ucf.edu)

## The Gabor Agency Supplemental Insurance

GABOR SUPPLEMENTAL POLICY ENROLLMENT	
<b>ELIGIBILITY:</b>	<p><b>Long Term Disability:</b> Salaried, minimum 20 hours p/week Employee only</p> <p><b>Long Term Care:</b> Employee and discounts available to eligible family members</p> <p><b>Life Insurance:</b> Employee and eligible family members</p>
<b>DEADLINE:</b>	<p><b>No deadlines.</b> Employees may enroll or cancel policies at any time.</p> <p><b>Long Term Disability Incentive:</b> New full-time employees who apply for coverage within 60 days of hire date = Guaranteed Issue</p> <p><b>Life Insurance Incentive:</b> New full-time employees who apply for coverage within 60 days of hire date = Guaranteed Issue (Group Term Life only)</p>
<b>ENROLLMENT/ FORMS</b>	<p><b>Long Term Disability:</b> Return enrollment form to HR <a href="http://www.gaboragency.com/ucfltd.asp">http://www.gaboragency.com/ucfltd.asp</a></p> <p><b>Long Term Care:</b> Contact Gabor directly at 1-800-330-6115 or <a href="mailto:UCF@gaboragency.com">UCF@gaboragency.com</a></p> <p><b>Life Insurance:</b> Contact Gabor directly at 1-800-330-6115 or <a href="mailto:UCF@gaboragency.com">UCF@gaboragency.com</a></p>

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## Retirement Plans

	<b>RETIREMENT ENROLLMENT</b>
<b>ELIGIBILITY:</b>	<b>ORP:</b> A&P, Faculty <b>FRS Pension:</b> USPS, A&P, Faculty <b>FRS Investment:</b> USPS, A&P, Faculty
<b>DEADLINE:</b>	<b>ORP:</b> 90 days from date of hire <b>FRS Pension:</b> last day of 5 <sup>th</sup> month following date of hire <b>FRS Investment:</b> last day of 5 <sup>th</sup> month following date of hire
<b>ENROLLMENT/FORMS for A&amp;P, FACULTY:</b>	<b>ORP:</b> <ol style="list-style-type: none"> <li>1. ORP 16/SUSORP Retirement Plan Enrollment Form  <a href="http://www.hr.ucf.edu/web/forms/benefits/ORP16Form.pdf">http://www.hr.ucf.edu/web/forms/benefits/ORP16Form.pdf</a></li> <li>2. Copy of company application            Vendor list: <a href="http://www.hr.ucf.edu/web/benefits/retirement.shtml">http://www.hr.ucf.edu/web/benefits/retirement.shtml</a></li> <li>3. Salary Reduction Agreement  <a href="http://www.hr.ucf.edu/web/forms/benefits/ORP%20sra.pdf">http://www.hr.ucf.edu/web/forms/benefits/ORP%20sra.pdf</a>            (Only if contributing own funds)</li> </ol> <b>FRS Pension:</b> ORP16/SUSORP Retirement Plan Enrollment Form <a href="http://www.hr.ucf.edu/web/forms/benefits/ORP16Form.pdf">http://www.hr.ucf.edu/web/forms/benefits/ORP16Form.pdf</a> <b>FRS Investment:</b> ORP16/SUSORP Retirement Plan Enrollment Form <a href="http://www.hr.ucf.edu/web/forms/benefits/ORP16Form.pdf">http://www.hr.ucf.edu/web/forms/benefits/ORP16Form.pdf</a>
<b>RETURN TO:</b>	<b>HUMAN RESOURCES</b>  <b>FAX:</b> 407-823-1095 <b>MAIL:</b> 12565 Research Parkway Suite 360 Orlando, FL 32826
<b>ENROLLMENT/FORMS FOR USPS:</b>	<b>FRS Pension:</b> Automatically enrolled <b>FRS Investment:</b> Enrollment packet will arrive approximately 60 days from the date of hire
<b>RETURN TO:</b>	<b>FRS per Instructions in Packet</b>

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