

Domestic Partner Benefits at the University of Houston

Advancing Equity and Institutional Competitiveness

A Report Produced by the

UNIVERSITY of
HOUSTON

Commission on Women

October 2010

“...On the right side of history and justice”

Lawrence Sager

Dean of the School of Law

The University of Texas at Austin

From remarks delivered in support of domestic partner benefits
for state employees at the Texas Equity Conference

The University of Texas at Austin

February 20, 2010

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The University Commission on Women is grateful to the faculty and staff of the University of Houston, past and present, who so generously and courageously shared

their stories detailing the human as well as economic costs associated with the lack of domestic partner benefits. Their accounts move the report beyond numbers and dollars to put human faces on the issue. They help sharpen our awareness of the impact that the lack of domestic partner benefits can have on members of the university community.

Outside UH, the University Commission on Women sincerely appreciates the work of the Pride and Equity Faculty/Staff Association (PEFSA) at The University of Texas at Austin. PEFSA is a resource group for lesbian, gay, bisexual and transgender employees at UT-Austin. Responding to concerns about workplace equity for LGBT faculty and staff, a PEFSA committee conducted research, benchmarked peer institutions, and interviewed members of the faculty and staff. After a yearlong study, the committee produced a 54-page report containing questions and answers regarding domestic partner benefits. The organizing work of this group and their report provided the inspiration for this work by the University Commission on Women at the University of Houston. Special thanks go to UT-Austin staff members Debra Winegarten and Karen Landolt for their support and consultation on the preparation of this report and for generously offering the PEFSA report as a model. In addition, Dr. John Moore in Human Resources Services at UT-Austin provided guidance in calculating benefits in the faculty comparison portion of this report.

In the preparation of this report, multiple sources were consulted: people, journal and newspaper articles, reports, and other media. Every effort was made to provide accurate and reliable information. Any mistakes are those of the authors.

A Note about Terminology

Preferred word choices change frequently, but the most widely accepted and inclusive term for the categories of sexual identity is the acronym “LGBT,” denoting Lesbian, Gay, Bisexual, and Transgender individuals.

We use the term, “domestic partners,” to refer to two individuals, either same-sex or different-sex, who are in a long-term committed relationship and who are responsible for each other’s financial and emotional well-being. “Same-sex couples” (sometimes called “homosexual couples”) are couples in which both people are male or female; “different-sex couples” (sometimes called “heterosexual couples”) implies pairings of one male and female. We would note that the term, “opposite-sex,” is less frequently used today because gender research reveals that men and women are not “opposites” and, in fact, often share many similar characteristics.

The phrase, “domestic partner benefits,” will often be represented in this report by the initialization, “DPBs.”

October 2010

President Renu Khator
University of Houston
212 E Cullen Building
Houston, TX 77204-2018

President Khator,

The University Commission on Women is pleased to present our report: *Domestic Partner Benefits at the University of Houston: Advancing Equity and Institutional Competitiveness*.

This report and the study behind it represent one of the many initiatives that the Commission has undertaken to explore and affect matters that have an impact on women at the University of Houston. As a presidentially-supported commission, we maintain the goals of promoting the concerns of women and of working for gender equity on campus.

Domestic Partner Benefits at the University of Houston is based on many months of research by Dr. Beverly McPhail (Director, UH Women's Resource Center), Dr. Amanda K. Baumle (Assistant Professor, Sociology) and Mr. Cody Pelletier (Manager, Human Resources). It is our sincere pleasure to present our findings and recommendations on this timely and important issue.

In recent years, the Commission has worked on three main topics: (1) recruitment and retention of female faculty, (2) family-friendly policies, and (3) campus child care. Our report on domestic partner benefits encompasses two of these topics: the recruitment and retention of female faculty and family-friendly policies. We undertook this study because the University of Houston does not offer domestic partner benefits to staff or faculty. We believe and provide support for the argument that this void in benefits results in inequities and hinders our institutional competitiveness. Both shortcomings can impede our drive for Tier-One status. We note, for example, that 84 percent of the top 25 Tier-One research universities in the nation offer such benefits.

On both matters of equity and competitiveness, our report includes significant and timely data and recommendations.

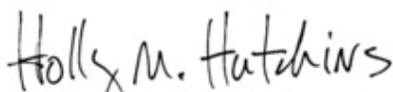
- We have compiled information on UH benefits, and we have calculated the costs of providing domestic partner benefits to UH faculty and staff;
- We have collected personal stories from current and former faculty members who have courageously made their stories public in order to make a case for adding domestic partner benefits for current and future employees; and
- We offer targeted recommendations for action.

Although we know that there can be challenges in initiating the provision of such benefits, many universities are moving ahead on this front. Our report highlights strategies used by such institutions.

In the end, we believe that the provision of domestic partner benefits is an essential tool for recruiting and retaining the best faculty and staff; it also demonstrates university support for equity. Both of these outcomes can bolster our quest to become a Tier-One institution.

We believe you will find this report both informative and inspiring. We appreciate the opportunity to serve you and the University of Houston community.

Sincerely,


Holly M. Hutchins, PhD
Faculty Chair


Cynthia Romero
Staff Chair

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Executive Summary

The University Commission on Women reports to the President of the University of Houston. The Commission is responsible for informing and advising the President and other senior administrative leaders, as well as the general university community, on issues and concerns that have an impact on women at the University of Houston. Two priority objectives adopted by the Commission are (1) to retain strong faculty and (2) to create a family-friendly environment. The Commission discussed the preconditions for meeting both objectives and, seeing a link to non-salary conditions of employment, authorized an exploratory study and report on Domestic Partner Benefits (DPBs) for University of Houston faculty and staff. *Domestic Partner Benefits at the University of Houston: Advancing Equity and Institutional Competitiveness* is the result of that Commission initiative.

In this Executive Summary, we present an outline of our key findings and recommendations to University of Houston President Renu Khator and to the university community.

Findings, in brief

1. Recruitment, Retention, Equity, and Diversity

The University of Houston (UH), like other public universities in Texas, does not provide benefits to either same-sex or different-sex domestic partners of faculty and staff members since their relationships do not qualify as “marriages” according to Texas law. This limitation on employee benefits creates economic inequities and sends a message that relationships between domestic partners are not valued. In an era that values inclusion and diversity, the University of Houston risks losing its competitive ability to attract and retain talented faculty and staff essential to helping UH achieve Tier-One status.

- Recruitment and retention: Tenured faculty and veteran staff report that leaving UH for employment at institutions where DPBs are offered is a part of their career projections. Some, in fact, have already left for this reason. Our faculty and staff continuing to work at UH also detail personal accounts of economic and emotional hardships because UH does not have DPBs, and we have evidence that potential new faculty hires inquire about domestic partner benefits, suggesting that they are taking this facet of compensation into account while they are faculty candidates.
- Equity: Research indicates that a married employee enjoys significantly greater long-term compensation than his/her non-married counterpart even when both employees perform identical jobs. An employee with a domestic partner must spend \$9,500 per year more than a legally married co-worker to gain the same benefits. This difference amounts to more than \$235,000 over the course of a 25-year career.
- Diversity: Because UH does not offer DPBs it undermines both its own non-discrimination policy and its ability to create and foster a diverse workforce..

2. Estimated Costs

The total estimated cost of UH contributions to health/medical insurance for domestic partners each year would range from a low of \$218,738 to a high of \$327,205.

Here a special observation is warranted: the majority of the cost for DPBs would relate to covering different-sex rather than same-sex partners. The estimated cost of covering different-sex partners ranges from \$203,673 to \$282,009; the cost for covering same-sex partners ranges from \$15,065 to \$45,196. The cost ratio for different-sex to same-sex partners, then is six (6) to one (1).

The estimated comprehensive cost to UH to add health/medical insurance for domestic partners would be between 0.86 percent and 1.28 percent of the current total budget of UH contributions to all employee premiums in Fiscal Year 2009.

3. DPBs and State Constitutions

Although Texas has a constitutional amendment constraining the definition of marriage to one man and one woman, other universities in states with similar constitutional provisions manage to offer DPBs to their faculty and staff.

4. Contradictions between Constitution and State Code

The Texas Education Code and Texas Insurance Code encourage public universities to provide benefits competitive with those offered by peer institutions and businesses with whom the Texas institutions compete for employees.

5. Practices Elsewhere

The following universities, state public employers, and private companies offer DPBs:

- 62 percent of original “Urban 13 Plus” universities
- 84 percent of the top 25 Tier-One research universities
- 304 universities in all, including all Ivy League schools
- Twenty states and the District of Columbia including Vermont [1994), New York (1995), Hawaii (1997), Oregon (1998), California (1999), Connecticut (2000), Maine (2001), Rhode Island (2001), Washington (2001), District of Columbia (2002), Iowa (2003), New Mexico (2003), New Jersey (2004), Massachusetts (2004), Montana (2005), Alaska (2006), Illinois (2006), Arizona (2008), Wisconsin (2009), Pennsylvania (2009) and Maryland (2009)
- 9,374 private employers in the United States
- Houston employers include BMC Software, Inc., BP America, Inc., Continental Airlines, Inc., Shell Oil Company, Vinson & Elkins LLP, Conoco Phillips, El Paso Corporation, Reliant Energy, Inc., and Waste Management, Inc.
- 5 Texas private universities: Baylor College of Medicine, Rice University, Southwestern University, Southern Methodist University, Trinity University

Recommendations

The recommendations of the University Commission on Women provide opportunities for both immediate and long-term change.

1. Applying DPBs at UH

We recommend that DPBs at UH include, but not be limited to, health insurance benefits and expanded sick leave to care for domestic partners and their family members. We also recommend that UH explore the inclusion of domestic partners in local insurance contracts negotiated by the university, including vision and dental care and Employee Assistance Programs.

2. Increasing Texas Legislature Awareness about DPBs Benefits

Since, under some interpretations, UH cannot offer DPBs without a change in statutory law, we recommend that senior administrators educate the Texas Legislature and the Employees Retirement System of Texas about the importance of DPBs for faculty and staff at UH and the manner of which other universities with similar constitutional challenges competitively offer DPBs to their faculty and staff.

3. Establishing an Advisory Committee on UH DPB-Related Policies and Procedures

We recommend that a university-wide advisory committee be appointed to study and propose changes in UH policies.. The committee should include representation from Human Resources to help identify policies and procedures not governed by the State Insurance Code that could be changed to allow for DPBs at UH.

Policy changes that might be considered

- Expanding MAPP 02.02.03 in which the definition of “family” can encompass employees’ domestic partners and their partners’ closest relatives. As an illustration, changing this policy would enable employees to take sanctioned bereavement leave when their domestic partners are involved.
- Including domestic partners in relocation reimbursements and assisting them in job-finding (to the same degree as these services would be extended to a married spouse).
- Inviting domestic partners to and welcoming them at all university functions that normally include married spouses. This provision would not require a MAPP change but could be accomplished in a memorandum from the President or Provost to Deans and Directors.
- Making sure that all changes in MAPP policies are replicated, as appropriate, in the UH Faculty and Staff Handbooks.

4. Appointing A Task Force to Study Practices in Other Universities Concerning DPBs

We recommend the creation of a task force that would include representatives of the senior administration, General Counsel’s office, UH Law Center, Human Resources, and University Commission on Women to find out how public universities outside Texas (but in states that have “Defense of Marriage Amendments”) have been able to adopt DPBs. Specifically, this group would focus on the manner in which other universities have extended health insurance to domestic partners and the ways they have included domestic partner benefits in contracts negotiated by the university with external service providers. The task force also would consult with experienced administrators at other universities who have developed successful DPBs programs in the face of legal challenges similar to those likely to arise in Texas. The task force would chart a path for creating appropriate and defensible DPBs at UH.

5. Gaining Support from Other UH Organizations

We recommend that the Faculty Senate, Staff Council, and the Student Government Association put forth respective resolutions in support of this report and its recommendations.

Effecting Change in Texas Over the Long-Term

This report constitutes the first phase of a multi-year commitment on the part of the University Commission on Women to gain domestic partner benefits for UH staff and faculty. Several of the changes we recommend have little or no adverse economic impact. In fact, in some cases, costs may be more than offset by savings associated with increased faculty and staff retention. The Commission will continue to monitor this issue over time.

As UH addresses DPBs within the restraints of current Texas law, it is the Commission's hope that action and advocacy at UH can actually influence modifications of the law over time. Adding domestic partner benefits might actually save the state money in the long term as domestic partners and their children are brought into employer-based insurance programs and health insurance costs are shared between the employer and the employee. Such a result would produce both improved health outcomes for individuals and lower public expenditures on health care. Broader DPBs can save health care dollars when preventative care leads to fewer visits to the emergency room. Other kinds of cost containment come with simplifying administrative infrastructure, creating larger pools of public employee participants, examining "Plus One" health insurance plans, and performance-based health care provider payments (National Council of State Legislatures, 2010).

While Texas law may have to change, we believe that offering domestic partner benefits is aligned with the values in our state. Texas has historically been known as a state that attracts independent-minded entrepreneurs and adventurers seeking a better life for themselves and their families. Part of this ethos involves seeking greater freedom and individual rights with less government intrusion into private family affairs. Regulating Texans' long-term affectional relationships and then basing employment benefits upon those restrictions seems to us to contradict Texas values. Furthermore, to disallow health insurance and other benefits for some public employee families inhibits the heads of those households from protecting and caring for their families.

The number of potential partnerships involved in Texas is not trivial. In 2005, the Williams Institute estimated that there were over half a million gay, lesbian, and bisexual Texans (Romero, et al., 2008). The Institute also reported that same-sex couples lived in 99% of the counties and constituted 1.0% of all of Texas' coupled households. Thus, same-sex couples and their children are present throughout the State of Texas, and many are affected by the state-level limitations on employment benefits.

Introduction to the University Commission on Women and the Report: Domestic Partner Benefits

Mission and Charge of the University Commission on Women

On September 24, 1999 President Arthur K. Smith appointed 24 UH-affiliated women to the Presidential Commission on the Status of Women for a two-year period to address the issues and concerns of women on campus. He charged the Commission to:

- Identify the concerns of women at the university;
- Promote gender equality throughout all areas of the university community;
- Recommend to the appropriate administrative offices ways to address the concerns of women at the university;
- Communicate and collaborate with other committees and organizations to provide support, advocacy, and information regarding women's issues; and
- Raise awareness of behaviors, actions, issues, policies, and procedures that affect the status of women.

The current University Commission on Women (now composed of women and men) continues to report to the President of the University of Houston and maintains its responsibility of informing and advising the President, senior administrative leadership, and the general university community on issues and concerns that have an impact on women at UH. The commission works in consultation with senior administration, deans, academic department chairs, and administrative department and program managers as well as the Staff Council, Student Government Association, and Faculty Senate.

Commission Accomplishments and Priorities

Over the years, the University Commission on Women has been involved in a number of projects. It has designed and administered a pilot mentoring project, awarded staff

and student scholarships, released a Status of Women report (McPhail, 2007), and conducted a climate survey of faculty, staff, and students. In 2008, the Commission set about to refocus its activities. In a series of meetings and exercises, the Commission identified three priorities: (1) assessing and improving female faculty retention, (2) assessing and advocating for more family-friendly policies, and (3) assessing and improving child care on campus.

After a review of the literatures on our priority topics and after looking at approaches to women's issues at peer institutions, the Commission determined that one policy that UH could adopt that would meet two of our goals -- improving faculty retention and adopting more family-friendly policies -- would be the addition of domestic partner benefits. The Commission came to understand that faculty retention and family-friendly policies are at the root of institutional equity and institutional competitiveness, both of which have had historical valence at UH and both of which were gaining heightened attention for the UH System Board of Regents and the newly arrived Chancellor and President. Finally, both equity and competitiveness are easily served within the larger mission of the Commission— to maintain due diligence on behalf of women at UH.

Equity and Institutional Competitiveness

Equity and UH Nondiscrimination Policies

The University of Houston is dedicated to providing employees with a fair and supportive work environment where they can grow professionally and contribute without fear of discrimination. This commitment is outlined in the Manual of Administrative Policies and Procedures (University of Houston, 2001). (See Appendix A for full statement of policy.)

The UH commitment to nondiscrimination is connected to “protected categories” of employee characteristics: race, color, religion, national origin, sex, age, disability, veteran status, and sexual orientation. Ensuring nondiscrimination is described as a “fundamental part” and “core objective” of UH’s policy and practice. Because this institutional value is expressed in the Manual of Administrative Policies and Procedures, any conduct that constitutes discrimination is considered to be a violation of university policy. Each year, the UH President recommits to the principle of nondiscrimination, along with affirmative action in employment, by issuing a presidential statement of equal employment opportunity (Office of the President, University of Houston, 2008-2009). (See Appendix B for full statement.)

A program of domestic partner benefits specifically protects against university discrimination in personnel actions -- a category of activity within the concept of equal employment opportunity. Personnel actions comprise recruitment and compensation, among other facets of employment. Later in this report we identify the compensation disadvantages faced by faculty and staff who are not legally married but live in domestic partnerships. For now, we posit these observations:

- In 2004, the average employee benefit plan constituted nearly one-fifth of the total compensation package, with almost half of that package made up of health insurance (Luther, 2006).
- Lesbian, gay, bisexual, and transgender employees do not receive the portion of that benefit which covers dependents. We assert that this disparity in

compensation and “inferred value of [a lesbian, gay, bisexual, or transgender] employee’s contribution” (Luther, 2006, p. 1) violates the UH policy of nondiscrimination based on sexual orientation.

Although UH considers equity and nondiscrimination to be “fundamental” parts and “core” objectives of its policies and practices, the university violates the spirit of these values when people who are in committed relationships are denied benefits for their partners based on their sexual orientation. In the case of employees with same-sex partners, the university discriminates against a “protected class,” and the substance of these violations has to do with an essential personnel action: compensation.

Later, this report will identify the financial disadvantages faced by faculty and staff who are not legally married, but rather are in a domestic partnership, compared to their colleagues who have access to benefits for their legally married spouses. As of 2004, the average employee benefit plan constituted nearly one-fifth of the total compensation package for employees, with almost half of that package comprised of health insurance (Luther, 2006). For lesbian, gay, bisexual, or transgender (LGBT) employees, the portion of that benefit that covers dependents (usually the employee’s spouse and children) is not available, resulting in a “significant disparity in compensation and the inferred value of that employee’s contribution” (p. 1). Therefore, UH may be violating its own policy of nondiscrimination based on sexual orientation when benefits for committed partners and their children are not allowed.

Demographic Realities and Campus Climate

It is a matter of fairness and equity to equally compensate similarly situated persons. By offering domestic partner benefits to UH faculty and staff, the university would communicate the commitment behind its policy on nondiscrimination. However, there are other factors to consider, as well.

Research reveals that “people with partners are two to three times more likely to lack health insurance than are married couples, even after controlling for factors that influence coverage” (Ash & Badgett, 2006, p. 597). To the extent that this condition prevails at UH, we are failing a portion of our faculty and staff in an area of fundamental needs.

Offering DPBs can also give substance to university aspirations of providing an inclusive and welcoming environment, and it can affect faculty and staff perceptions of that environment. A research study with a national sample of gay and lesbian employees found that they were less likely to report either experiencing or observing sexual orientation discrimination in organizations that had, alongside their written policies, the practice of offering DPBs (Ragins & Cornwell, 2001).

The first UH survey that sought opinions on campus climate among LGBT students, staff, and faculty (conducted by the University Women’s Commission in 2009) found that only 41 percent of this group felt supported on campus and only 38 percent were aware of resources available to them on campus. Of equal concern, survey respondents reported hearing disparaging remarks about LGBT students (35 percent), LGBT faculty (18 percent), and LGBT staff (36 percent) (University Commission on Women, 2009).

The survey also asked about university-sponsored events where LGBT individuals were portrayed negatively. Between 25 and 31 percent of respondents reported such events, with the percentages varying according to the university role involved -- LGBT faculty, staff or student. While in many respects UH demonstrates its pride over the diversity of students, staff, and faculty on campus, we cannot ignore these survey data about perceived support for and treatment of LGBT persons on campus, and we do not want to overlook a potential contributing factor, namely, the lack of DPBs at UH.¹

Institutional Competitiveness

In addition to violating the principle of equity, the absence of DPBs at UH creates barriers to institutional competitiveness. At a time when our institution is striving for Tier-One status, attracting and retaining “the best and brightest” requires the broadest possible pool of candidates. A university that does not offer DPBs will be less attractive to some faculty and staff, and it will be less competitive relative to other institutions -- educational or for-profit, public or private.

In a study of employee benefit trends by MetLife (2009), 40 percent of the respondents said that benefits played an important role in their decisions about whether to remain with their employer. In their most recent study of employee trends, benefits increased in importance as factors contributing to an employee’s sense of loyalty to their employer while factors such as advancement opportunities and company culture were deemed of lesser importance. Fully 81 percent reported that health benefits were “an important factor” in employee loyalty. Turning to employers, the MetLife survey found that 54 percent named offering benefits as a key strategy for improving employee retention.

¹ Our recommendations about DPBs apply equally to different-sex and same-sex domestic partnership. However, while different-sex domestic partners are not provided health and other benefits at UH, they do have the options of getting legally married or entering a common-law marriage which would, then, qualify them for benefits (AMP, 2009). Same-sex couples are not afforded these options in Texas.

DPBs in the Workplace: The Status of Universities and Corporations

Institutional competitiveness is context-bound. UH does not need to compete with all higher education institutions and all private employers. It does, however, need to hold its own among the strongest private institutions in Texas and all Tier-One universities across America. In addition, its competitors include local corporations that hire staff, and local, regional, and national corporations that hire researchers. Employee compensation that includes DPBs can be a differentiator in this competition.

Colleges & Universities in Texas

In Texas, UH has competition on the benefits front from several private universities and research institutions. The following institutions offer DPBs:

- Baylor College of Medicine
- Rice University
- Southwestern University
- Southern Methodist University
- Trinity University

Some public universities that do not currently offer DPBs, however, are actively working on the issue. In 2006, the Pride and Equity Faculty/Staff Association (PEFSA) was established as a University Resource Group for LGBT employees at The University of Texas at Austin. A PEFSA committee, formed to look at benefits, conduct research, benchmark peer institutions, and interview faculty and staff on campus. After a year's study, the committee produced a 70-page report containing questions and answers regarding DPBs benefits (Pride and Equity Faculty/Staff Association, 2008). It found that UT-Austin was losing top faculty and staff because the institution does not offer DPBs. Its estimate of the costs to add DPBs was about 0.05% percent of the current UT-Austin budget for health insurance expenditures. The PEFSA report recommends that DPBs be added to employee benefit plans at UT-Austin as soon as possible and that, in the interim, faculty and staff salaries should be supplemented where financial inequities exist between legally married couples and domestic partnerships.

Colleges & Universities Nationwide

The move toward adding DPBs at universities is occurring at the national level, as well. In 2008, the College and University Professional Association for Human Resources found that 42 percent of responding institutions offered health care benefits for same-sex domestic partners and 34 percent for different-sex partners (College and University Professional Association for Human Resources, 2008). The CUPA-HR survey trends show percentage increases every year. The American Association of University Professors (AAUP) supports the provision of DPBs for faculty, adopting a resolution to that effect as long ago as 1995. The AAUP statement, cited in Euben (2005), reads: "The American Association of University Professors is opposed to discrimination in the selection of faculty, the granting of promotion or tenure, and the providing of other conditions and benefits of academic life." Euben (2005) notes that many universities are voluntarily adopting DPBs for their faculty and staff, while at others faculty members are taking legal action to garner such benefits.

Among its national peers, UH can examine two specific sub-groups for comparative purposes. One group is the Coalition of Urban Serving Universities (USU), a group that began as 13 primarily urban schools and now includes more than 40 universities and medical centers. In our research, we looked at a contingent of 21 universities holding membership in the predecessor organization to the USU, namely, "Urban 13 Plus." Our report reveals that a majority (62 percent) offer DPBs. (See Appendix G.)

Drawing comparisons with another peer group, we note that UH aspires to the ranks of the top 25 "Tier-One" research institutions. Among these aspirational peers, 21 (84 percent) offer DPBs. (See Appendix H.) Two of the four universities in that group that do not offer DPBs are The University of Texas at Austin and Texas A&M University, College Station. We conclude that UH could distinguish itself from its Texas "Tier-One" colleagues by taking the affirmative lead on instituting DPBs.

The Human Rights Campaign (HRC) expands the roster of "Tier-One" institutions as it tracks the state of the workplace for LGBT individuals. The HRC studies employees working at the "Top 125 Colleges and

Universities” designated by U.S. News and World Report. In its 2006-2007 report, HRC found that “90 percent of the colleges and universities that comprise the U.S. News list prohibit discrimination based on sexual orientation and 37 percent ban it based upon gender identity, while 60 percent provide health benefits to the partners of their employees” (HRC, 2007, p. 27). The report’s authors note that these percentages are slightly ahead of Fortune 500 companies.

The report also lists other groups of universities that provide domestic partner benefits: the top 10 colleges and universities, all eight Ivy League Schools, and all but one of the 11 Big Ten conference schools.²

Industries & Organizations

Since the Texas Insurance Code encourages Texas universities to offer benefits comparable to those offered in the private sector, it is helpful to assess the corporate climate with regard to sexual orientation discrimination and the provision of DPBs. The Human Rights Campaign’s annual survey of employers found that eight companies of the Fortune 10 provide partner health benefits. Among the Fortune 500, which collectively employ nearly 25 million people, 53 percent provide health benefits to partners of their employees (Human Rights Campaign Foundation, 2009).

On a broader rating called the “Corporate Equity Index,” the HRC Foundation evaluated 583 businesses on such factors as nondiscrimination policies, transgender health benefits, and domestic partner benefits. Five Houston-based employers earned the highest rating (100 percent) in this survey: BMC Software, Inc., BP America, Inc., Continental Airlines, Inc., Shell Oil Company, and Vinson & Elkins LLP (Houston Business Journal, September 1, 2008).

In addition to these five corporations, other Houston companies are noteworthy for their provision of DPBs: Conoco Phillips, El Paso Corporation, Reliant Energy Inc., and Waste Management, Inc. (Human Rights Campaign Foundation, 2009). In effect, when it comes to competing

locally for staff and research faculty, the University of Houston will remain at a distinct disadvantage until it offers DPBs.

States

Many states offer DPBs to their state employees in same-sex relationships. According to the National Conference of State Legislators, the following states and district provide such benefits:

Twenty states and the District of Columbia including Vermont [1994], New York (1995), Hawaii (1997), Oregon (1998), California (1999), Connecticut (2000), Maine (2001), Rhode Island (2001), Washington (2001), District of Columbia (2002), Iowa (2003), New Mexico (2003), New Jersey (2004), Massachusetts (2004), Montana (2005), Alaska (2006), Illinois (2006), Arizona (2008), Wisconsin (2009), Pennsylvania (2009) and Maryland (2009) (NCSL, 2010).

² The 2007 HRC report found that the University of Wisconsin was the only Big Ten conference school that did not offer DPBs; however, on June 29, 2009, Wisconsin Governor Jim Doyle signed into law a state budget offering health insurance benefits to same-sex domestic partnerships which the University of Wisconsin began offering in January, 2010.

Changing Professional and Public Opinions about Sexual Orientation

Professional Opinions

As recently as 40 years ago, little was known or understood about sexual orientation and sexual identity. Until the 1970s, homosexuality was classified by the American Psychological Association (APA) as a disease. The APA now defines sexual orientation as “an enduring emotional, romantic, sexual, or affectional attraction towards others” (American Psychological Association, 2009, p. 1). Although sexual identity is a fluid notion, we most often use three categories to describe it: heterosexuality, homosexuality, and bisexuality.

A pivotal question about sexual identity is whether or not it's a matter of choice. Most scientists today agree that sexual orientation is most likely the result of a complex interaction of environmental, cognitive, and biological factors. In most people, sexual orientation is shaped at an early age. There is also considerable recent evidence to suggest that biology, including genetic or inborn hormonal factors, plays a significant role in a person's sexuality (APA, 2009, p. 1).

Public Opinion

As professional opinions have changed over time on the topic of sexual orientation, so has public opinion. Polling by the Gallup organization over three decades shows that public support (or tolerance) for gay rights is at a high-water mark (Gallup, 2007). In ever-increasing numbers Americans are supporting the notion that gay or lesbian relationships between consenting adults should be legal: 43 percent supported such relationships in 1978; 50 percent in 1999; 52 percent in 2005; and 56 percent in 2008 (Gallup, 2009). Gallup polls have found that certain factors influence Americans' support for gay rights including gender, age, political party affiliation and religiosity. That is, people more likely to support gay rights are female, younger, Democrats or Independents,

and those less likely to attend religious services (Gallup, 2009).

While it is still a matter of political controversy, growing numbers of states now entitle all couples (different-sex and same-sex) to the protection and benefits accompanying marriage; this is true in Massachusetts, Connecticut, Iowa, Vermont, and New Hampshire (HRC, 2009). Following a ruling by the California Supreme Court, the approximately 18,000 marriages of couples that were performed prior to the passage of Proposition 8 in November 2008 remain valid.³ In New York and the District of Columbia, marriages of couples legally performed in other jurisdictions must be recognized (Human Rights Campaign Foundation, 2009).

Opinions about protections and benefits in the workplace trend in the same direction and more strongly. Nearly nine out of ten Americans believe that gay men and lesbian women should have equal rights in terms of job opportunities (Gallup, 2007). A more recent Gallup poll revealed that while a majority of Americans continue to oppose gay marriage, a substantial percentage of Americans (67 percent) say gay and lesbian domestic partners should have access to health insurance and other employee benefits (Gallup, 2009, p. 4).

Closer to home, a number of Texas governmental entities now allow domestic partner benefits. These include the cities of Austin, Dallas, and El Paso and Travis County (Equality Texas, 2009). In November, 2009, former City of Houston comptroller, Anise Parker, was elected Mayor of Houston. Her election as an openly lesbian woman generated national attention and praise, once again demonstrating the accepting nature of Houstonians who are focused on what people can accomplish in their jobs rather than their sexual identities.⁴

³ Proposition 8 refers to the constitutional amendment passed in California that made marriage exclusive for different-sex couples. In August of this year, a federal judge in California found Proposition 8 to be unconstitutional and, as of the issuing of this report, gay marriage in California appears likely to be reinstated.

⁴ While these facts demonstrate a change in public opinion at local (city and country) levels, we must note that university faculty and staff are state -- not municipal -- employees.

Changing Attitudes and Actions at UH

Changes in public and professional opinions also resonate with changing attitudes at UH. And changing attitudes have resulted in new activities around LGBT issues on campus.

GLOBAL, UH's registered LGBT student group, holds weekly meetings attended by 40-60 students. Cougar Allies, a group comprised of UH staff and faculty members, meet monthly to advocate for LGBT causes on campus. In 2009, a LGBT minor under the umbrella of the Women, Gender, & Sexuality Studies Program was added to the university program of studies in the College

of Liberal Arts and Social Sciences. In the summer of 2009 Provost John Antel sanctioned the creation of the LGBT Resource Center, also under the auspices of the Women, Gender & Sexuality Studies Program, with the provision of a part-time director. Cougar Ally Training (CAT) also began in 2009 with the first training held in spring 2009. CAT offers three-hour training sessions to faculty and staff in order to raise their awareness of LGBT issues on campus and offer information and resources so they may be supportive and effective allies to LGBT students, staff, and faculty on campus. The richness of sexual orientation diversity on campus is being acknowledged.

UH without DPBs: The Costs to Faculty and Staff

Monetary Disadvantage

Up to this point, we have discussed the costs of not having DPBs at UH in terms of a diminished university posture on equity and the potential loss of strong faculty and staff, either because they leave or because they decide against applying for jobs here (or, if offered a job, decline it). To understand why current members of the faculty and staff might be inclined to leave or might not be fully productive in their positions at UH, we need to consider the ongoing, recurrent costs borne directly by some of those employees. Business reporters at the *New York Times* recently published an analysis of the costs associated with same-sex domestic partnerships, citing all of the health, legal, and other expenses gay couples bear that “straight” couples do not. The *Times* analysis was thorough and nuanced, resulting in a wide range of “bottom lines” running from best- to worst-case scenarios. It revealed that, in a worst-case scenario, a couple’s lifetime cost of being gay amounted to an additional \$467,562 (Bernard & Lieber, 2009). At the lowest extreme, if a same-sex couple can get access to better health insurance, lower taxes, and other reduced costs, the best-case scenario posed an additional cost of \$41,196.

In addition to total costs, the reporters also made a focused examination of health insurance disparities. In its worst-case scenario, the lower earner’s employer did not provide health care coverage and her partner’s employer did not offer domestic partner benefits. So the lower-earning partner had to purchase coverage in the private market while the higher earning partner had to provide separate coverage for herself and their two children. This scenario resulted in an additional lifetime cost of \$211,993 just for health insurance (Bernard & Lieber, 2009). The best-case scenario in which each partner had his or her own employer-provided coverage resulted in an additional lifetime cost of \$28,595 for health insurance.

A report generated by PEFSA at UT-Austin compares two similarly situated faculty members. Both are 46-year-old associate professors, employed five years at UT, each with two legal children. The only difference is that Employee

A is legally married and whose spouse is not insured outside of UT and Employee B has a domestic partner who cannot be insured through UT. In this scenario, Employee B -- the employee with the domestic partner -- would receive \$8,108 less in university compensation than the legally married faculty member (PEFSA, 2008). Table 1 looks at similarly situated professors (same age, salary, length of employment) at UH and the difference in overall compensation they suffer by not having their domestic partners eligible for a range of benefits. According to this comparison, a UH professor who has a domestic partner loses an estimated \$9,506.25 in overall compensation per year compared to his or her colleague with a legally wedded spouse, largely due to additional expenditures necessary to gain comparable benefits (see Table 1). Over a 25-year career this difference adds up to almost a quarter of a million dollars (\$237,656).⁵

Faculty recruitment and retention become an issue especially as other universities are increasingly adding DPBs to their employee benefit packages, thereby becoming “employers of choice.” UH Human Resource Manager, Cody Pelletier, (personal communication, September 4, 2009) reports that he recently fielded a phone call from a UH faculty search committee chair. The chair called to inquire if UH offered DPBs because a job offer to a full professor had been extended and the potential new hire inquired about the provision of these benefits. Pelletier informed the search committee chair that such benefits are not provided at UH. It was unclear at the time of the printing of this report if the job candidate’s decision to accept or decline the job offer was impacted by the lack of DPBs. Pelletier additionally notes that current employees frequently call the Human Resources department with questions about how to attend the funeral of the mother of their domestic partner when UH bereavement leave does not recognize the mother as an immediate family member, thereby disallowing paid leave. Current employees also call to see if they can use sick leave to care for a domestic partner, and once again this is disallowed under current university policy.

⁵ This analysis is equally valid for staff members at UH.

Table 1. Benefits, compensation, and expense comparison between legally married faculty member and faculty member with a domestic partner

Benefit Employee A Employee B	Employee A	Employee B	Employee A Annual Compensation	Employee A Annual Expense	Employee B Annual Compensation	Employee B Annual Expense	Employee B Partner Additional Annual Expense
Family	46 year old associate professor; legal spouse not working at UH; legal parents of two children; Employed five years at UH	46 year old associate professor; domestic partner not working at UH; legal parents of two children; employed five years at UH					
Base Salary			\$80,800.00		\$80,800.00		
FICA	Standard	Standard	\$4,405.67	\$4,405.67	\$4,624.55	\$4,624.55	
Health Insurance	For employee, children, and spouse; UH shares insurance premium for employee, dependents and spouse.	For employee and dependent children only; UH shares insurance premium for employee and children. Domestic partner pays for own insurance.	\$9038.64	\$4,414.08	\$6394.80	\$1770.24	\$5,268.00
Dental	For employee, children, and spouse; UH offers voluntary group coverage.	For employee and dependent children only; Domestic partner pays for own insurance.		\$347.76		\$245.40	\$212.88
Sick Leave	In addition to paid sick leave, employee is allowed paid time off to care for members in immediate family: spouse, children, & immediate family members qualify. Assume three days off for employee to take care of sick spouse.	In addition to paid, personal (employee) sick leave, employee is allowed paid time off to care for members in immediate family: children qualify; domestic partner does not qualify as an immediate family member. Assume 3 days taken off for employee to take care of sick partner.					\$1,243.08
Dependent Life Insurance	For children and spouse: \$5,000 coverage for each person	For children only, domestic partner ineligible. Domestic partner pays for own insurance.		\$16.56		\$16.56	\$91.32
Accidental Death & Dismemberment Insurance	For employee, children, and spouse: \$200,000 coverage	For employee and children only. Domestic partner pays for own insurance.		\$96.00		\$96.00	\$77.40
Long Term Care	For employee and spouse	For employee only. Domestic partner pays for own insurance.		\$4,896.00		\$2,448.00	\$3,092.13
Bereavement Leave	3 to 5 days off (3 days local, 5 days out of area) paid for leave for death in immediate family. Assume death of spouse's mother.	3 to 5 days off (3 days local, 5 days out of area) paid for death in immediate family; however, domestic partner and his/her mother is not considered an immediate family member.					\$2,071.80
Total			\$94,244.31	\$14,176.07	\$91,819.35	\$9,200.75	\$2,071.80
Employee Annual Compensation Minus Expenses:			\$80,068.24		\$70,561.99		
<p>Values based on approximations of expenses incurred in given examples. Health insurance premiums and other services offered by the university have been equated to external products and services for estimated costs and expenses needed by domestic partner.</p> <p>FICA amounts based on annual salary less pretax deductions.</p>							

DPBs Economic Difference

The analyses represented in Table 1 (pages 18-19) produce the following net difference in effective employee compensation between “Employee A” and “Employee B” who are identical in background except that Employee A has a legal different-sex spouse and Employee B has a domestic partner.

The annual compensation-minus-expenses for Employee A is:
 $\$94,244.31 - \$14,176.07 = \$80,068.24$

The annual compensation-minus-expenses for Employee B is:
 $\$91,819.35 - (\$9,200.75 + \$12,056.61) = \$70,561.99$

Annual compensation difference = \$9,506.25

Note: The expenses for non-UH plans used in Table 1 are actual costs for plans or coverages outside of the university’s benefit plans. In some cases identical coverage options were not available, but every effort was made to find an option that was comparable to the UH plan. In every case, the demographic criteria (salary, gender, age) were identical. For further explanations, see Appendix C.

Personal Stories

Although the calculations of the unequal monetary costs borne by faculty and staff members with domestic partners are important, the numbers alone cannot provide the full impact of what the lack of benefits means to individual faculty and staff members and their families. The costs are emotional and psychological, as well as financial. The University Commission on Women solicited personal stories about how individual staff and faculty members at UH have been affected by lack of DPB. Current and former faculty and staff members, including both same-sex and different-sex couples, generously and courageously shared their stories in letters that can be read in their entirety in Appendix D.

The stories tell not only of financial disadvantage, but point to how morale is affected by persons feeling like “second class citizens” compared to their colleagues, who are able to obtain benefits not offered to similarly situated professors and staff. Such inequities take a human toll and ultimately affect recruiting and retention decisions.

One recently-retired UH professor detailed the financial burden of paying for her partner’s insurance over the course of 29 years since, as a same-sex partner, she was ineligible for coverage under the UH plan. A current UH staff member writes that her partner is currently unemployed and, rather than being able to add her to the staff member’s policy, her partner is applying for a Harris County Gold Card, which provides health care for low-income county residents. She speaks of the frustration of not being able to provide for her partner and how that impacts the activities they undertake. Another professor speaks of losing faith in UH as an institution when his relationship is not seen as legitimate when the relationship of his departmental colleagues are recognized. The lack of DPB not only has financial and emotional costs, but one employee details how lack of insurance restricts her and her partner’s outdoor activities in order to minimize possible injury. The implications of the lack of DPB are serious and far-reaching.

Estimating \$500/month for 25 years

Dear President Khator

...Finally, my partner has been a private practice therapist (a double alum from UH by the way) and has had to carry private individual health insurance as a result. Over 25 years, this has cost us approximately \$150,000 (estimating \$500/month for 25 years) compared to \$45,000 (estimating \$150/month for 25 years). As a retiree, my health insurance is still covered (a benefit for which I am very grateful), but Diana’s private coverage continues to increase (currently over \$600/month).

If I were to be starting my career in higher education now, I would consider only those universities that offer full partnership benefits. I’m sure there are up and coming faculty doing that now, how many, no one knows, but the absence of equal benefits will certainly continue to limit the pool of talent for UH and UH system.

Dr. Karen Holmes
Professor Emeritus
Graduate College of Social Work

full letter on page 30

Lack of domestic partner benefits

Dear President Khator,

I very much enjoyed working with the top-notch graduate students the Creative Writing Program attracted – among the very best in the nation—but ultimately I was not able to continue my commitment to Houston. One of the major reasons for this is the lack of domestic partner benefits. My partner Paul Lisicky and I have been together for fourteen years. We are legally married in Massachusetts, and our marriage is recognized in New York State, where we now reside. During the time I taught at Houston, I've seen heterosexual couples recruited by the department, and of course full spousal benefits have been extended to these hires.

This has real economic consequences. Private health insurance is absurdly expensive, and comes with many restrictions; it seldom covers pre-existing conditions in the way that group health insurance does. But the effects ultimately run deeper. The implication that my primary relationship is not legitimate in the eyes of my employer is a corrosive factor. It's difficult to maintain one's faith in an institution that denies a central aspect of one's reality. How could I not feel like a second-class citizen, and Paul even more so?

Professor Mark Doty
John and Rebecca Moores Professor
Graduate Program in Creative Writing

full letter on page 31

We have to pay double (or more) for health insurance

Dear President Khator,

I am a 47-year-old lesbian and my partner is 49. I have worked in higher education for about 10 years. I am considered a state employee, and therefore have my insurance through the state. I have always been satisfied with my coverage, and fortunately my partner always had insurance through her employer. Recently, however, she has become unemployed. Financially, by cutting discretionary spending, we are able to make all of our bills with my salary and a small freelance job she has. We cannot, however, afford insurance for her.

As a resident of Harris County, she may be eligible for the “gold card” which is health care that is provided by the county. She is in the process of applying right now. It is strange for me to depend on government assistance when any state employed straight person could simply add their partner to their policy.

When planning activities, we evaluate whether or not we are putting her at risk for injury. We are normally active people and frequently do things like kayak, fish, hike, bike, and work out; but truthfully, just driving in a car is taking a big risk. I realize that we would still have to pay part of the premium if the state did cover same sex couples, but it would be much more affordable than what private insurance costs.

It's puzzling to think that we have to pay double (or more) for health insurance for my partner compared to my co-workers' families. If I had the opportunity to work in a comparable position for a university that offered partner benefits, I would jump at the chance. Working in an environment where all employees are truly treated equally is very important to me. I hope that UH does not take too long to realize that this is an important issue.

Lorraine M. Schroeder, M.A., LPC
LGBT Resource Center, Director
Learning Support Services, Counselor

full letter on page 33

I know I have not been compensated fairly

Dear President Khator,
My partner, Edward Lukasek, and I came to UH in 1999, at which time I accepted a position as Associate Professor of Music. Previously I was University Organist at Stanford University. Stanford covered Edward's health insurance as my domestic partner. He worked for many years in the wine business and our hope was that he would find good employment here in Houston, including health benefits. That did not happen. Soon after coming to UH I interviewed at other schools and was offered a professorship at Oberlin College, which offers domestic partner benefits. Luckily, at that time UH had a sympathetic dean who helped Edward find employment (and benefits) here at UH. Because of that we were able to stay

I would say that the lack of domestic partner benefits has been a major concern for us here in Houston. In the end, everything worked out for us. But I know I have not been compensated fairly in comparison to my married colleagues. Straight couples receive benefits as soon as they are married. Edward and I have been together thirty-seven years!

Dr. Robert Bates
Associate Professor of Music
Moores School of Music

full letter on page 32

Lack of benefits pushed us to institutionalize our relationship

Dear President Khator,
My days without spousal support were during my first, tenure track job at Saint John Fisher College, but the experience would have been much the same at UH if I'd arrived under the same circumstances. By the time I came to UH, I had married my partner because, as a woman in a relationship with a man, I could. The wear and tear on our unmarried status imposed on us pushed us to institutionalize our relationship in search of relief from a constant, nagging feeling that Steve was being exploited and poorly treated. For heterosexual couples too principled to make this accommodation, and for all homosexual couples, I am certain that experiences like those I recall here would be far more painful...

Dr. Margot Backus
Associate Professor
English

full letter on page 34

The common themes running through each personal letter are stories of financial and emotional costs due to UH not providing domestic partner benefits and the impact such policies have on employment decisions. In a competitive market, more and more recruitment and

retention decisions are made on the basis of employer-based benefits and these personal letters attest to that trend. Each current or former employee adds his or her voice to the request for the provision of DPB at UH.

Estimated Cost to UH for Offering Domestic Partner Health Insurance

It is a challenge to determine how many employees would apply for DPBs for their partners (and possibly their partner's children), if such benefits were made available. Various researchers have worked to estimate these numbers. Badgett (2001) reports that "the anecdotal experience of individual employers offering health benefits to partners suggests that fewer than 1 percent of employees sign up a partner when offered partner coverage, and those partners do not have higher than average health care costs." Five years later, Ash and Badgett (2006) developed an employer "take-up rate" by formulating an equation based on (1) the proportion of employees who requested DPBs in companies that made the benefit available as reported in the annual Kaiser Family Foundation and Health Research and Educational Trust survey, (2) year 2000 data in the U.S. Census on number of unmarried partners, and (3) Current Population Survey (CPS) data on the number of people who were employed full-time. Analysts determined that the numbers would range from 0.1 percent to 0.3 percent for same-sex partners and 1.3 percent to 1.8 percent for different-sex partners, for a total range of 1.4 percent to 2.1 percent of all employees. These percentage ranges were applied in the calculations of likely health insurance costs to UH that are presented in Table 2.

Estimates also were made for whether offering DPBs would result in adding a partner only (member & spouse) or the partner and the children of the partner (member & family) who also would be eligible. At one time gay and lesbian couples were less likely to have children than they are today. Some same-sex couples bring children into the relationship from a previous heterosexual relationship and other couples use assisted reproductive technologies to have children, resulting in a "gayby boom." The likelihood of the presence and number of children in same-sex and different-sex households were calculated based on 2000 U.S. Census Data estimates (Baumle, Compton, & Poston, 2009). These data reveal that 38.6 percent of same-sex households and 46.3 percent of different-sex households reported a child present.

For full time UH employees, the state pays 100 percent of the medical premium and 50 percent of the dependent premium (Office of Human Resources, University of Houston, undated). For part-time employees the state pays 50 percent of the medical premium and 25 percent of the dependent premium (HR, undated).

Data from the 2000 U.S. Census analyzed by the Williams Institute found that Harris County reported the largest number of same-sex couples in the state with 8,612 couples or 0.71 percent of all households in the county (Romero, Rosky, Badgett, & Gates, 2008). Researchers also found that same-sex couples live in 99 percent of the counties in Texas and constitute 1.0 percent of coupled households. With these numbers in mind, a range of 0.1 percent to 0.3 percent for couples that will apply for DPBs seems low. However, the literature suggests many reasons why same-sex couples might not request DPBs from their employers, including: 1) each member of the couple may already have his or her own employer-based health insurance, 2) due to stigma, discrimination, or a wish for privacy the employee does not want to identify as LGBT and ask for DPBs, and 3) the Internal Revenue Service treats employer contributions for partner health coverage as taxable income, thereby creating a tax burden, a disincentive, and even a tax penalty. By one estimate (Pear, 2009) employees with domestic partner benefits pay \$1,100 a year more in taxes, on average, than married employees with the same coverage (Ash & Badgett, 2006). (See Appendix J for a fuller discussion of the tax implications of DPBs.) In late 2009, H.R. 3962, the Affordable Health Care for America Act, passed by the House of Representatives included a provision that would alleviate this tax burden. Under the bill, such benefits would be tax-free, like health benefits provided to the family of an employee married to a person of a different sex.

In absolute numbers, different-sex domestic partners are three to nine times more common than same-sex partners (Ash & Badgett, 2006). Therefore, the majority of the costs of adding domestic partner benefits come from different-sex, rather than same-sex, domestic partners, although a higher proportion of people in same-sex couples appear to be taking up the benefit (Ash & Badgett, 2006). Ash and Badgett's study also found that gay men and lesbian women in couples are more likely to be uninsured than are married heterosexuals, while unmarried people with different-sex partners are the least likely to be insured.

Our calculations show that the total estimated cost of UH contribution to medical insurance for domestic partners each year would range from a lower bound estimate of

\$218,738 to a high estimate of \$327,205. (See Table 2.) It is important to note that the majority of this cost would be to cover different-sex rather than same-sex partners. For instance, the estimated cost of adding UH contributions for health insurance premiums for same-sex partners ranges from \$15,065 to \$45,196 compared to \$203,673 to \$282,009 for different-sex partners. Based on Ash and Bladgett's estimates the projected cost to UH to add medical insurance for domestic partners would be between 0.86 percent and 1.28 percent of the current total budget of UH contributions to all employee premiums for 2008-2009.

The cost of providing different-sex domestic partner benefits is more than six times the cost of providing benefits to same-sex couples. Since the costs for different-sex domestic partners is so high, it might be tempting to offer only same-sex domestic partner benefits since different-sex partners have the option of marrying or entering a common-law relationship while same-sex partners do not have this option under Texas law. Although such a course of action could potentially open up the university to legal challenges of discrimination, some top 25 Tier-One schools offer DPB to only same-sex domestic partners. (See Appendix H.)

Table 2: Estimated Monetary Costs for UH's Contribution to Domestic Partner Health Insurance

Expenditure Calculation	Lower Bound Estimate	Upper Bound Estimate
Approximate annual budgeted contribution to all employee premiums for 2008-2009	\$25,507,542	\$25,507,542
Total estimated DPB medical contribution for same-sex partners	\$15,065	\$45,196
Total estimated DPB medical contribution for different-sex partners	\$203,673	\$282,009
Total estimated DPB medical contribution	\$218,738	\$327,205
Estimated percentage of current budget for adding same-sex partners	0.06%	0.18%
Estimated percentage of current budget for adding different-sex partners	0.80%	1.11%
Estimated percentage of current budget for adding DPB Total	0.86%	1.28%

Benefits other than Health Insurance

In addition to medical insurance, the other benefits available to legally married spouses at UH are substantial. Table 3 lists benefits available and to whom. In order to be both fair and competitive, the university needs to offer these benefits to all employees, their spouses, and domestic partners.

Advocating for additional costs in times of already-strained budgets is a tough sell, in spite of the call for doing so in the name of equity and institutional competitiveness. However, the increase in costs must be weighed against the possible savings that could be incurred. For instance, although there are no reliable figures, there is some anecdotal evidence that professors leave the university due to lack of DPB. The cost of losing faculty and hiring new

faculty is substantial. For example, the Harvard Graduate School of Education Collaborative on Academic Careers in Higher Education (COACHE) estimates that a new faculty hire costs approximately \$96,000 (COACHE, 2010). The breakdown includes: \$2,000 for advertising, \$10,000 for person hours of the search committee, \$7,500 for staff time, \$1,500 travel for three candidates, \$5,000 relocation costs, \$50,000 for a start-up package, and \$20,000 for incorporation and orientation. Therefore, by preventing the loss of a single faculty member, two to six years of university medical contributions toward same-sex employee health care premiums can be covered.

Table 3. Non-medical Benefits Comparison

Benefit	Legal Spouse	Domestic Partner
Accidental Death and Dismemberment	Yes	No
Bereavement Leave	Yes	No
COBRA Coverage	Yes	No
Dental Insurance	Yes	No
Employee Assistance Program	Yes	No
Family Medical Leave	Yes	No
Life Insurance	Yes	No
Long Term Care	Yes	No
Parental Leave	Yes	No
Texflex (flexible spending accounts)	Yes	No
Recreational Facilities	Yes	Yes

Texas Statutes Affecting DPBs

Factors Obstructing the Provision of DPBs

The health benefits of public employees in Texas are regulated by the Texas Insurance Code, administered by Employee Retirement System (ERS) of Texas. The Texas Insurance Code (under the Texas Employees Group Benefit Act) includes in its definition of eligible dependents of a public employee the individual's "spouse" and "unmarried child younger than 25 years of age," along with more specific descriptions of eligible and ineligible children (Texas Insurance Code, Sec. 1551.004(a)). "Spouse" is not further defined in the insurance code, however, ERS administrators note that the State of Texas does not recognize same-sex partners as "spouses" (Employee Retirement System of Texas, personal communication, July 20, 2009).

The Texas Family Code defines marriage as a condition involving a man and a woman. It further stipulates that "a license may not be issued for the marriage of persons of the same sex" (Texas Family Code, § 2.001(b)). Language in the Defense of Marriage Act (Senate Bill 7, passed by the Texas Legislature and signed by Governor Rick Perry in 2003) makes it explicit that Texas does not legally recognize same-sex marriage or civil unions (Texas Family Code § 6.204). Two years later, the Texas Legislature passed a constitutional amendment, the Texas Marriage Amendment, which was subsequently approved by Texas voters, defining marriage as the "union of one man and one woman" (Texas Constitution, Art. I, Sec. 32 (a)). The amendment adds: "This state or a political subdivision of this state may not create or recognize any legal status identical or similar to marriage" (Texas Constitution, Art. I, Sec. 32 (a)).

Factors Promoting the Provision of DPBs

Despite the obstructions cited above, there are provisions in the Texas Insurance Code that would support UH offering DPBs. For instance, one of the stated purposes of the code is "to attract and retain competent and able employees by providing employees and their dependents with life, accident, and health benefit coverages as least equal to those commonly provided in private industry" (Texas Insurance Code, Section 1551.002(2)). This invites

a study of "private industry" in Texas, and, in its annual survey of private industry, the Human Rights Campaign and found that 53 percent of Fortune 500 companies provided health benefits to the same-sex partners of their employees (Human Rights Campaign Foundation, 2009).

One can extrapolate from other language in the Texas Code that DPBs would constitute positive employment incentives. For example, various sections of the code encourage public institutions to create employee benefits that will:

- foster, promote, and encourage employment by and service to the state as a career profession for individuals of high standards of competence and ability;
- recognize and protect the state's investment in each permanent employee by promoting and preserving economic security and good health among employees and their dependents;
- foster and develop high standards of employer-employee relationships between the state and its employees; recognize the long and faithful service and dedication of state officers and employees and encourage them to remain in state service until eligible for retirement by providing health benefits for them and their dependents (Texas Insurance Code, Sec. 1551.002, 3-6).

UH's provision of DPBs would promote all of these outcomes.

Challenges and Solutions to Public Universities Offering DPB

Alternative Ways to Offer Benefits

Many large state universities manage to offer DPBs to their employees despite restrictive state statutes. The University of Michigan, the University of Florida, The Ohio State University and the University of Arizona are representative examples among “Tier-One” universities. These four institutions have followed different paths, but all of their responses can instruct university leadership if there’s a will to make the provision of DPBs an institutional goal (PEFSA, 2008).

All public universities are hampered when their health plans are state funded and, as a consequence, regulated by state statutes that do not permit domestic partner benefits. Private universities do not face such restrictions.

The University of Michigan began offering DPBs in September 1993, but its benefits were threatened by a 2004 state constitutional amendment banning recognition of marriage for same-sex couples. The language specifically at issue included the phrases “similar union” and marriage “for any purpose.” The Michigan Supreme Court upheld a State Appeals Court ruling that these phrases violated the intent of the Michigan Marriage Amendment. The University of Michigan first capitulated by suspending its benefits programs for same-sex domestic partners but later (2008) changed the language of its benefits plan, replacing references to domestic or same-sex partners with the wording, “Other Qualified Adult” (University of Michigan, 2009). To date, the new language has not been tested under the Michigan Constitution.

The University of Florida was restricted from expanding its nondiscrimination policy or taking any action to provide DPBs while it was directly governed by the state legislature. The university responded to these restrictions by lobbying the legislature to change its rules. In 2001, the legislature relinquished its direct control over the University of Florida system by creating an independent Board of Trustees that now has authority to create its own policies and regulations and govern itself. One of the Board’s first actions was to expand its nondiscrimination policy and create a program of DPBs for its employees (PEFSA, 2008).

Third, The Ohio State University (OSU) is able to offer DPBs to its employees despite the state’s Defense of Marriage Act law because the legislature specifically exempted the provision of DPBs by universities from the effects of the law. Universities have local discretion on this issue, and OSU determined that offering DPBs was vital to its ability to recruit and retain faculty, staff, and administration (PEFSA, 2008).

Finally, the University of Arizona issued a report that recommends two creative workarounds to the public funding issue: 1. reimbursing eligible employees to pay for the cost of covering domestic partners under private insurance plans, or 2. offering coverage under self-insured plans (PEFSA, 2008).

Additional Benefits to offer in lieu of full DPBs

Public institutions elsewhere can act as a model for alternatives in the area of DPBs. For example, Georgia State University, a member of the Urban Serving Universities (and its former incarnation, the Urban13 Plus), like UH, is restrained by state law and institutional policy from providing domestic partners of employees with health insurance (personal communication, August 10, 2009). Instead GSU offers staff and faculty members vision, dental, and life insurance plans that can include domestic partners, and it does this through contracts written at the university level. Similarly, the University of North Carolina at Chapel Hill offers dental care and life insurance, but not health insurance to domestic partners. These two universities could provide interim models for UH while it pursues a means to offer a fuller array of DPBs. (See Appendix L for a list of benefits currently available and unavailable to domestic partners of UH System employees.)

Recommendations

The recommendations of the University Commission on Women provide opportunities for both immediate and long-term change.

1. Applying DPBs at UH

We recommend that DPBs at UH include, but not be limited to, health insurance benefits and expanded sick leave to care for domestic partners and their family members. We also recommend that UH explore the inclusion of domestic partners in local insurance contracts negotiated by the university, including vision and dental care and Employee Assistance Programs.

2. Increasing Texas Legislature Awareness of DPBs Benefits

Since, under some interpretations, UH cannot offer DPBs without a change in statutory law, we recommend that senior administrators educate the Texas Legislature and the Employees Retirement System of Texas about the importance of DPBs for faculty and staff at UH, with particular attention to promoting equity and enhancing institutional competitiveness.

3. Establishing an Advisory Committee on UH DPBs-Related Policies and Procedures

We recommend that a university-wide advisory committee be appointed to study and propose changes in UH policies. The committee should include representation from Human Resources to help identify policies and procedures not governed by the State Insurance Code that could be changed to allow for DPBs at UH.

Policy changes that might be considered

- Expanding MAPP 02.02.03 in which the definition of “family” can encompass employees’ domestic partners and their partners’ closest relatives. As an illustration, changing this policy would enable employees to take sanctioned bereavement leave when their domestic partners are involved.
- Including domestic partners in relocation reimbursements and assisting them in job-finding (to the same degree as these services would be extended to a married spouse).
- Inviting domestic partners to and welcoming them at all university functions that normally include married spouses. This provision would not require a MAPP change but could be accomplished in a memorandum from the President or Provost to Deans and Directors.
- Making sure that all changes in MAPP policies are replicated, as appropriate, in the UH Faculty and Staff Handbooks.

4. Appointing a Task Force to Study Practices in Other Universities Concerning DPBs

We recommend the creation of a task force that would include representatives of the senior administration, General Counsel’s office, UH Law Center, Human Resources, and University Commission on Women to find out how public universities outside Texas (but in states that have “Defense of Marriage Amendments”) have been able to adopt DPBs. Specifically, this group would focus on the manner in which other universities have extended health insurance to domestic partners and the ways they have included domestic partner benefits in contracts negotiated by the university with external service providers. The task force would also consult with experienced administrators at other universities who have developed successful DPBs programs in the face of legal challenges similar to those likely to arise in Texas. The ultimate charge to the task force would be to chart a path for creating appropriate and defensible DPBs at UH.

5. Gaining Support from Other UH Organizations

We recommend that the Faculty Senate, Staff Council, and the Student Government Association put forth respective resolutions in support of this report and its recommendations.

Conclusions

The University of Houston is a dynamic and forward-thinking institution and is immensely proud of its diverse students, staff, and faculty. The UH family comes from different backgrounds and have varying make-ups with regard to gender, race, country of origin, religion, and sexual orientation. Our constituents at UH also differ in the ways that they live in families and partnerships. One way to honor these differences among members of the faculty and staff is to provide them domestic partner benefits.

Providing DPBs moves UH into the company of those institutions across America that not only express the value of treating employees fairly and equitably but also act on it. Providing DPBs will more fully realize the policy of nondiscrimination that UH already has on its books. Providing DPBs removes the tacit restraint for an institution that essentially says one thing and does another, leaving its LGBT faculty and staff members feeling discriminated against.

The provision of DPBs also allows the university to be more competitive as an institution, attracting and retaining talented staff and faculty regardless of sexual orientation or marital status. In order to achieve Tier-One status the university needs to be fully competitive with the institutions that constitute its aspirational peers -- most of which offer DPBs. If UH were to adopt DPBs, it would gain a competitive edge on its institutional rivals in Texas, The University of Texas at Austin and Texas A&M University. Put another way: the addition of DPBs represents a smart business decision as well as an ethical decision. It is a special moment when doing the right thing also makes the best business decision for the university.

The courageous letters of current and former UH faculty and staff members sound a human voice on this policy issue. They speak of the financial hardships that the lack

of domestic partner benefits impose on their families; they speak of depressed morale, feeling like second-class citizens, and the pain of having their partners rendered invisible by the university. They speak of inherent unfairness and injustice and how such actions impact their relationship with the university. One speaks of the role that this policy inaction played in his separating from UH altogether.

The findings in this report give rise to a series of recommendations for President Khator, senior leadership, and the UH Regents to consider both for immediate and long-range outcomes. These recommendations leading to the adoption of DPBs also fulfill the spirit of the Texas Insurance Code that actively encourages the provision of public employee benefits to attract and retain employees, supporting state employment as a career, investment in the health of employees and their families, the development of strong employer-employee relations, and appropriate recognition of long and faithful service.

It is rarely a financially opportune time to advocate for added benefits, and least of all in a time of great state economic insecurity and looming budget cuts. However, the financial challenges impact our faculty and staff, as well. A first step that would make progress within a manageable budget framework would be to add same-sex partner benefits now, planning to phase in different-sex partner benefits as the country's economy and university's financial situation improve.

As UH moves ever so close to becoming a Tier-One institution, the University Commission on Women urges a timely consideration of our findings and the earliest adoption of our recommendations.

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APPENDICES

Appendix A: University of Houston Nondiscrimination Policy

University of Houston

Manual of Administrative Policies and Procedures (MAPP)

Number: 02.07.01

Policy Statement:

II. The University of Houston is committed to providing a work and academic environment for employees and students free from all forms of discrimination based on protected categories. Protected categories are race, color, religion, national origin, sex, age, disability, veteran status, or sexual orientation. Conduct that constitutes discrimination shall be considered to be a violation of university policy.

Members of the university community are encouraged to promptly report complaints alleging discrimination.

Available at: <http://www.uh.edu/mapp/02/020701.pdf>

Appendix B: Presidential Statement of EEO Policy

September 1, 2008

Each year the University of Houston reaffirms its commitment to nondiscrimination and affirmative action in employment. The University is committed to create a work environment free from discrimination for all persons regardless of their race, color, religion, age, national origin, sex, disability, veteran's status, sexual orientation, or from retaliation for having participated in a constitutionally and/or statutorily protected activity. This vision is a fundamental part of the University's guiding philosophies and policies. In this regard, the University shall not discriminate against any person with respect to any personnel action on these bases. Such personnel actions include but are not limited to compensation, recruitment, selection, promotion, terminations, and educational opportunities.

The University of Houston is committed to prevent prohibited discrimination in its own policies and practices that may unfairly limit the employment prospects of qualified individuals. Harassment based on sex, race, religion, color, age, national origin, disability, veteran status and sexual orientation will not be tolerated.

The University assumes a positive stance in its commitment to develop a workforce that reflects the relevant labor market. The University's Affirmative Action Program is an important tool in achieving that goal. It identifies areas in which the University's workforce may be insufficiently diverse with respect to the available pool of talent and establishes goals and provides an impetus for a program that will address those imbalances.

I call upon each member of the University community to make decisions based on the principles of mutual respect and civility, and to ensure that all equal employment opportunity and affirmative action principles and obligations are met, as set forth in Executive Order 11246, and Titles VI and VII of the Civil Rights Act of 1964. It is through these objectives that we build on each other's diverse values, styles and experiences, and thereby continue to grow and prosper.

It is up to each of us as individuals to uphold these principles as a core objective during our time at the university, so as to ensure that we are not only in compliance with the law, but that we accord respect to all of our faculty and staff members and to our students.

The Office of Affirmative Action/Equal Employment Opportunity is charged with administering the Affirmative Action Program and with educating the campus community on all matters relating to equal opportunity and affirmative action. That office has also established procedures to investigate and resolve complaints concerning prohibited discrimination. Questions regarding our policies, procedures or this program may be addressed to the Office of Affirmative Action/Equal Employment Opportunity.

Equal Employment Opportunity at the University of Houston (2008-2009). President's Statement of EEO Policy. University of Houston, Houston, TX. EEO/AA Office.

Appendix C: Explanation of Calculations Between Employees A and B:

Annual Compensation and Expenditures

Base Salary	The annual base salary for both Employee A & Employee B is identical
FICA	FICA stands for Federal Insurance Contribution and is the Social Security and Medicare federal withholding tax required of employees. FICA accounts for 7.65 percent of the employee's paycheck and the employer is required by law to match this amount. The compensation difference is due to the pre/post FICA tax deduction for spouse/domestic partner.
Health Insurance	Employee A qualifies for coverage for the whole family with the employee paying half of the total premium and the university paying for the other half, based on ERS premium rates effective September 1, 2009. Employee B's premium covers only employee and children as the state does not consider a domestic partner a spouse and coverage is not allowed. The university picks up more than half of this coverage. Therefore, the domestic partner must buy his/her own insurance coverage as an individual rather than be covered by UH group insurance. A quote for individual coverage was obtained by the same company as UH uses, Blue Cross/Blue Shield, with comparable deductibles for a cost of \$439/month.
Dental	Although the UH does not subsidize employee dental premiums, the employee is eligible for group coverage through the HumanaDental DHMO plan. Employee A pays for family coverage for employee, spouse, and children. Employee B is eligible for coverage for the employee and children only. The domestic partner must seek individual coverage. A quote for individual coverage by Humana Dental PPO Plan was \$212.88 annually for an individual.
Sick Leave	Calculation based on the daily compensation rate payable under sick leave, based on daily rate for faculty member using 9-month calendar, \$414.36/day and assuming 3 days used.
Dependent Life Insurance	Employee life insurance coverage is separate for dependent's coverage. Eligible dependents are spouse, including common-law spouse, and unmarried children under the age of 25. Monthly premium for dependents is \$1.38 per month, which covers all dependents for \$5,000 term life coverage per person, regardless of the number of dependents. Since a domestic partner is not considered an eligible dependent a quote of \$91.32 annually was obtained for individual coverage in the amount of \$5,000.
Accidental Death & Dismemberment (AD&D) Insurance	Employee A's premium is for family (includes spouse). The university does not subsidize but instead makes group rates available to employees and their eligible dependents. Member plus family rate (\$0.04/\$1,000 premium for standard \$200,000 coverage) is the same for both Employee A and Employee B. Domestic partner must pay for individual premium. Online estimate for coverage for \$250,000 (only amount available, note \$50,000 in additional coverage) was obtained through Mutual of Omaha Insurance Company.

<p>Long Term Care (LTC)</p>	<p>UH does not provide coverage but employees may purchase through the university. Coverage for Employee A includes spouse. Coverage for Employee B is for employee only. Coverage for both Employee A and B is \$204/month per adult. Employee B must purchase coverage for domestic partner from an outside vendor. A quote was obtained using same company as UH uses, John Hancock Life Insurance Company.</p>
<p>Bereavement Leave</p>	<p>Paid bereavement leave is available to employees for their immediate family members. Since domestic partners are not considered immediate family members, nor are their relatives (in this case, the domestic partner's mother), the employee is unable to take paid leave to attend the out-of-state funeral of his long-time partner's mother. Since faculty have no paid vacation days let us hypothesize that the faculty member has no sick days available, it would cost him/her five days of unpaid leave, calculated at the daily rate for a 9-month faculty contract \$414.36 for five days.</p>

All quotes available upon request.

Appendix D: Personal Stories of University of Houston Faculty and Staff

TO: Dr. Renu Khator
President, UH and Chancellor, UHS

FROM: Dr. Karen A Holmes
Professor Emeritus, UH

DATE: September 3, 2009

SUBJECT: Domestic Partner Benefits: A Personal History at UH

As briefly as I can, I'll provide a summary of the costs I've incurred, and continue to incur, as a result of having no domestic partnership benefits at the University of Houston. I write only to demonstrate the real life consequences in the hope that UH will join others – including the majority of Fortune 500 companies – in offering equal benefits to same sex domestic partners.

I joined the university in 1980 as an Assistant Professor of Social Work; I retired this past May after having served as a tenured faculty, as assistant dean, associate dean for academic affairs, acting and interim dean of the college for four years. Overall, UH has been a wonderful employer and a fine institution for me. However, my most profound disappointment has been the absence of domestic partnership benefits.

My partner and I have been in a committed relationship nearly 25 years, and we have co-parented three fine sons; they were 10, 8 and 4 when Diana and I met. All three have achieved success personally and professionally: all are married, two have children; one is an attorney, another a computer systems analyst/programmer, and the third is a CPA. When they were minors, in order to get them covered on my health insurance, we had to hire an attorney and appear before a judge to obtain a court order requiring that I be allowed to insure them. The financial cost was close to \$1,000, but the emotional cost was greater – what married couples can do by filling out a form required significant time and energy for me.

Finally, my partner has been a private practice therapist (a double alum from UH by the way) and has had to carry private individual health insurance as a result. Over 25 years, this has cost us approximately \$150,000 (estimating \$500/month for 25 years) compared to \$45,000 (estimating \$150/month for 25 years). As a retiree, my health insurance is still covered (a benefit for which I am very grateful), but Diana's private coverage continues to increase (currently over \$600/month).

If I were to be starting my career in higher education now, I would consider only those universities that offer full partnership benefits. I'm sure there are up and coming faculty doing that now, how many, no one knows, but the absence of equal benefits will certainly continue to limit the pool of talent for UH and UH system.

**Professor Mark Doty
Department of English
Murray Hall
Rutgers University
New Brunswick, NJ 08901**

September 6, 2009

Dear President Khator,

I am glad to contribute a few words to your report on domestic partner benefit issues at the University of Houston. I was the John and Rebecca Moores Professor in the graduate program in Creative Writing from 1998 until 2009. I was granted tenure after my first year at the university. During my decade in Houston I was chosen as Outstanding Professor of the Year by the English Department's association of graduate students. I received a Category V merit rating – the top ranking offered – during each year of my employment.

As a faculty member, I developed a number of new courses, took an instrumental role in the re-design of the graduate curriculum and the reform of comprehensive exams, and served as a member of the Planning and Graduate Committees, as well as any number of search committees. I hosted visiting writers, planned and implemented two special colloquia, and worked closely with Inprint, the Creative Writing Program's nonprofit fundraising organization.

As a writer/scholar, I have published eight volumes of poetry, most recently *Fire to Fire: New and Selected Poems*, which won the National Book Award for Poetry in 2008. I have also published four volumes of nonfiction prose, most recently *Dog Years*, a memoir which was a *New York Times* bestseller and which won the Israel Fishman/Stonewall Book Award from the American Library Association. I have received fellowships from the Guggenheim Foundation, the Ingram Merrill Foundation, the Whiting Foundation, the National Endowment for the Arts, and the Lila Wallace/Readers Digest Foundation. I have been a Fulbright Fellow in New Zealand, and a Rockefeller Study Center Fellow in Italy.

I list these accomplishments in order to describe my position as a senior professor at the university. I very much enjoyed working with the top-notch graduate students the Creative Writing Program attracted – among the very best in the nation—but ultimately I was not able to continue my commitment to Houston. One of the major reasons for this is the lack of domestic partner benefits. My partner Paul Lisicky and I have been together for fourteen years. We are legally married in Massachusetts, and our marriage is recognized in New York State, where we now reside. During the time I taught at Houston, I've seen heterosexual couples recruited by the department, and of course full spousal benefits have been extended to these hires.

This has real economic consequences. Private health insurance is absurdly expensive, and comes with many restrictions; it seldom covers pre-existing conditions in the way that group health insurance does.

But the effects ultimately run deeper. The implication that my primary relationship is not legitimate in the eyes of my employer is a corrosive factor. It's difficult to maintain one's faith in an institution that denies a central aspect of one's reality. How could I not feel like a second-class citizen, and Paul even more so? As I found myself assuming an increasingly heavy workload, taking on more dissertations and theses, and counseling many students because we didn't have an adequate number of faculty for the size of the program, I found myself feeling that I was being used. The institution was very willing for me to go the extra mile in taking care of many students, but it wasn't willing to go that distance for me. And this despite the fact that the English Department has a low number of full professors, and therefore

my vote was very much needed on central Department committees, and my input often required. I took my position very seriously, took my scholarship and creative work seriously, performed considerable service to program, department and university – and still wound up feeling undervalued.

I have accepted a new position at Rutgers. This was not a decision I took lightly, after giving ten years to Houston's graduate writing program. But among the things that my new position offers are full partner benefits: medical, dental, disability, and so forth. We have been welcomed and recognized as a couple.

If the University of Houston wants to become, as it has announced, a top tier institution, then it needs the best faculty in their fields. It's 2009 now, and the university system needs to move closer to national academic standards concerning personnel benefits. Applying outdated ideas about partnership and marriage stands in the way of faculty retention, as my story clearly demonstrates.

Sincerely,
Mark Doty
Professor

For the Women's Commission Report on Domestic Partner Benefits:

Dear President Khator,

My partner, Edward Lukasek, and I came to the University of Houston in 1999, at which time I accepted a position as Associate Professor of Music. Previously I was University Organist at Stanford University. Stanford covered Edward's health insurance as my domestic partner. He worked for many years in the wine business and our hope was that he would find good employment here in Houston, including health benefits. That did not happen. Soon after coming to UH I interviewed at other schools and was offered a professorship at Oberlin College, which offers domestic partner benefits. Luckily, at that time UH had a sympathetic dean who helped Edward find employment (and benefits) here at UH. Because of that we were able to stay. Eventually, Edward earned his masters degree in library science and he now works full time as a catalogue librarian at the Museum of Fine Arts here in Houston, where he has excellent benefits. I would say that the lack of domestic partner benefits has been a major concern for us here in Houston. In the end, everything worked out for us. But I know I have not been compensated fairly in comparison to my married colleagues. Straight couples receive benefits as soon as they are married. Edward and I have been together thirty-seven years!

Robert Bates
Associate Professor of Music
Moore School of Music

For the Women's Commission Report on Domestic Partner Benefits:

Dear President Khator,

I am a 47-year-old lesbian and my partner is 49. I have worked in higher education for about 10 years. I am considered a state employee, and therefore have my insurance through the state. I have always been satisfied with my coverage, and fortunately my partner always had insurance through her employer. Recently, however, she has become unemployed. Financially, by cutting discretionary spending, we are able to make all of our bills with my salary and a small freelance job she has. We cannot, however, afford insurance for her.

As a resident of Harris County, she may be eligible for the "gold card," which is health care that is provided by the county. She is in the process of applying right now. It is strange for me to depend on government assistance when any state employed straight person could simply add their partner to their policy. I can't say that our situation is currently causing us any hardship, but we are both constantly aware of the risk we have been forced to take.

When planning activities, we evaluate whether or not we are putting her at risk for injury. We are normally active people and frequently do things like kayak, fish, hike, bike, and work out; but truthfully, just driving in a car is taking a big risk. I realize that we would still have to pay part of the premium if the state did cover same sex couples, but it would be much more affordable than what private insurance costs.

It's puzzling to think that we have to pay double (or more) for health insurance for my partner compared to my co-workers' families. If I had the opportunity to work in a comparable position for a university that offered partner benefits, I would jump at the chance. Working in an environment where all employees are truly treated equally is very important to me. I hope that UH does not take too long to realize that this is an important issue.

Sincerely,

Lorraine M. Schroeder, M.A., LPC
LGBT Resource Center, Director
Learning Support Services, Counselor

For the University of Houston Commission on Women Domestic Partnership Report

Dear President Khator,

My days without spousal support were during my first, tenure track job at Saint John Fisher College, but the experience would have been much the same at the University of Houston if I'd arrived under the same circumstances. By the time I came to the University of Houston, I had married my partner because, as a woman in a relationship with a man, I could. The wear and tear our unmarried status imposed on us pushed us to institutionalize our relationship in search of relief from a constant, nagging feeling that Steve was being exploited and poorly treated. For heterosexual couples too principled to make this accommodation, and for all homosexual couples, I am certain that experiences like those I recall here would be far more painful.

Steve and I received our degrees in the same year and from the same institution -- mine was a PhD in English, his was a BS in computer and electrical engineering. For years we'd hoped maybe a miracle would happen and we'd be able to stay in Texas, where Steve had lived for his entire life, but of course I was lucky to be offered a job anywhere. So we moved that summer to Rochester, New York. Steve did all the packing and moving while I completed revisions on my dissertation, and he was then responsible for unpacking us, setting up our new house, and arranging all domestic matters while I jumped in immediately to get up to speed in a new job where I was already "behind" on the day I started. As a tenure-track junior professor, I needed to work 80-100 hours a week to keep up with articles that were already accepted for publication but that required revision, to keep going with the book project that had attracted the job offer, and to keep up with my teaching and service responsibilities, which were also crucial to my earning tenure. Steve, meanwhile, subsidized all of this economically, professionally and personally. Rochester was not the high tech mecca that Austin is (neither is Houston -- after a dozen years as an engineer, Steve is now in real estate). To suit himself to my career, Steve took a series of weird little engineering jobs at small businesses that were always being bought and gutted by foreign holding companies. The move itself was expensive, inconvenient, labor-intensive, and took Steve away from his family and a town he loved. My enormous burden of student loans meant we couldn't buy a house, even though he graduated with no debt and a tidy nest egg from an internship with Advanced Microdevices that the move wiped out. He packed and rented the U-Haul while I completed revisions on my dissertation. He drove the U-Haul while I edited the hard copy of the completed, revised dissertation to make further changes before submitting the manuscript to a university press that I was very, very lucky to have ask to see it. I found a house to rent through a contact in my new department, but when we arrived there, Steve set up a computer for me in my office at school and I camped out there, revising and printing out copies of the book manuscript and creating, revising and printing syllabi and ordering books while Steve set up our utilities and in every way put our house together for us. Not only did he handle every aspect of creating a home for us before he could even begin to send out resumes, depriving him of more income and relegating to him a lot of boring, thankless and unpleasant tasks, but he also became my on-campus tech support -- the only on-campus tech support I would receive during my time at Fisher. Without him, it is no exaggeration to say I would not have published a prize-winning book with a prestigious university press, and I would never have come to the University of Houston.

If I had tried to hire someone to do for me what Steve did for me, I doubt I would have been able to find anyone willing to do such grinding and various labor for any pay, but if I could have found someone willing to take the job of assistant, computer technical support and housekeeper, I expect it would have cost virtually my own entire salary to compensate him for his work, and for the first few months, I would have needed to pay that person to work more than full-time.

While Steve was able to take on a 40-hour a week job after the first month or two of getting me set up at home and in my office, he continued to do more than his fair share of housework and all the technical support that my scholarship and teaching required. He created a computer program that allowed me to calculate final grades -- a task that by itself would have cost upward of \$1000 if the college or I had paid the going hourly rates for a computer/electrical engineer

to do it. When a book chapter of mine had something go dreadfully wrong with the code, so that the text was hopelessly garbled, Steve worked on it every night for over a week, and ended up devising a program that would go through the entire document and pick out and delete all the trouble-making code character by character. That one, I couldn't have paid anyone to do because any engineer with the skills to repair such a complicated and weird problem would have been completely unavailable to a desperate English professor at any price; that person would normally have been working at the highest levels of computer engineering, writing code for new, cutting edge products. The only reason Steve wasn't is because to have that job, he would have had to be somewhere else and not in our home, supporting me. On another occasion, I was working on my first book review -- a frightening and significant milestone for a young scholar -- and the computer inexplicably froze. I called Steve in a panic and on that particular day, a slow day at his own office, he and two or three of his colleagues worked all day to track down and delete the toxic code that had caused my computer to freeze. I walked into Steve's office and one of his co-workers said "bourgeoisification?" I said "it's a word!" He looked skeptical.

Steve cohosted many social gatherings with students and faculty, managed our finances, fixed and replaced technology, handled bills, office supplies, paperwork, and helped me create a master document so that the final draft of my book came out correctly paginated, something that sounds simple but entailed months of agony and the careful reading of many fat technical manuals.

These are a few of my most vivid memories of the support Steve gave to me and to Saint John Fisher College during my years there as a junior faculty member. He did all of this while at the same time he was deemed unworthy of health coverage or any other benefits because we weren't married. If we were a couple, nothing we could have done would have made Steve's substantial, ongoing contribution to my effectiveness as a teacher, scholar and faculty member worthy of institutional support. As it was, the inequity of the position in which Steve was placed left lasting scars, which still come up from time to time whenever the allocation of family labor generates friction. Seven years of gross exploitation left ME with a debt to my partner that I will never be able to make right. Many people feel resentful after they get tenure. It's easy to understand: one works diabolically hard, and in return, in the end, all one gets is the same job one has already been fulfilling exceptionally well for seven years. But the resentment of the unmarried partner who has fulfilled all the support functions of a husband or wife, but done so while being insultingly and expensively excluded from the various benefits through which institutions recognize the benefits to faculty that spouses supply is greater by far, and it is directed not so much toward the institution as toward the newly-tenured partner. Just as the same old job that seven years of labor has made onerous is all one gets for tenure, the same old partner that seven years of emergencies and crises have made a pain rather than a prize is all they get.

Writing about this reminds me of how much I owe to Steve, who showed his loyalty, support and love to me far more powerfully by all the help and support he gave to me in my early years as a professor than he ever could have by walking down an aisle in a tuxedo, but it also reminds me of how much both of us paid to Saint John Fisher College, and to the profession as a whole, to establish me and keep me in the profession. Whether it is fair to ask so much of faculty members is one question, but whether it is fair to ask as much from their unmarried partners as from their married partners, but without the forms of compensation and recognition that married partners receive, is a far more clear-cut question. The current system, where it has not already been updated, as more and more institutions are doing, is horribly unfair, and can do great damage to faculty satisfaction, morale, productivity and loyalty in the long run by gouging considerably more uncompensated labor out of unmarried domestic spouses than the huge amount that is already extracted from their married counterparts.

Sincerely,
Margot Backus
Associate Professor of English

Appendix E: Estimated Expenditures for UH Contributions to Medical Costs for Same-Sex Partners

UH Contribution to Medical cost (Full-time)	Lower Bound Estimate	Upper Bound Estimate
Number of eligible full-time employees	4503	4503
Full-time “Member Only” cost	\$361	\$361
Full-time “Member & Spouse” cost	\$567	\$567
Full-time “Member & Family” cost	\$705	\$705
Estimated percentage of employees who would claim DPBs	0.1%	0.3%
Estimated number of full-time employees in DP relationships expected to participate in DPBs	4.5	13.5
The difference in annual UH contribution for “member only” vs. “member & spouse” FY09	\$206	\$206
The difference in annual UH contribution for “member only” vs. “family”	\$344	\$344
Percentage of new partners who would elect family option	38.6%	38.6%
Number of partners who would elect “member & spouse”	2.8	8.3
Number of partners who would elect “family”	1.7	5.2
Added MONTHLY cost from “member & spouse”	\$570	\$1,709
Added MONTHLY cost from “family”	\$598	\$1,794
Total Added MONTHLY cost:	\$1,168	\$3,503
Total Added ANNUAL cost:	\$14,010	\$42,031

UH Contribution to Medical cost (Part-time)	Lower Bound Estimate	Upper Bound Estimate
Number of eligible part-time employees and graduate students	436	436
Part-time "Member Only" cost	\$108	\$108
Part-time "Member & Spouse" cost	\$283	\$283
Part-time "Member & Family" cost	\$352	\$352
Estimated percentage of employees who would claim DPBs	0.1%	0.3%
Estimated number of part-time employees in DP relationships expected to participate in DPBs	0.4	1.3
The difference in annual UH contribution for "member only" vs. "member & spouse" FY09	\$175	\$175
The difference in annual UH contribution for "member only" vs. "family"	\$244	\$244
Percentage of new partners who would elect family option***	38.6%	38.6%
Number of partners who would elect "member & spouse"	0.3	0.8
Number of partners who would elect "family"	0.2	0.5
Added MONTHLY cost from "member & spouse"	\$47	\$141
Added MONTHLY cost from "family"	\$41	\$123
Total Added MONTHLY cost:	\$88	\$264
Total Added ANNUAL cost:	\$1,055	\$3,165

*** This rate is based upon 2000 U.S. Census data reflecting the proportion of same-sex and different-sex households that have one or more child present (Baumle, Compton, & Poston, 2009).

Appendix F: Estimated Expenditures for UH Contributions to Medical Costs for Different-Sex Partners

UH Contribution to Medical Cost (Full-time)	Different-Sex Lower Bound Estimate	Different-Sex Upper Bound Estimate
Number of eligible full-time employees	4503	4503
Full-time "Member Only" cost	\$361	\$361
Full-time "Member & Spouse" cost	\$567	\$567
Full-time "Member & Family" cost	\$705	\$705
Estimated percentage of employees who would claim DPBs	1.3%	1.8%
Estimated number of full-time employees in DP relationships expected to participate in DPBs	58.5	81.1
The difference in annual UH contribution for "member only" vs. "member & spouse" FY09	\$206	\$206
The difference in annual UH contribution for "member only" vs. "family"	\$344	\$344
Percentage of new partners who would elect family option***	46.3%	46.3%
Number of partners who would elect "member & spouse"	31.4	43.5
Number of partners who would elect "family"	27.1	37.5
Added MONTHLY cost from "member & spouse"	\$6,477	\$8,968
Added MONTHLY cost from "family"	\$9,323	\$12,909
Total Added MONTHLY cost:	\$15,800	\$21,877
Total Added ANNUAL cost:	\$189,597	\$262,519

UH Contribution to Medical Cost (Part-time)	Different-Sex Lower Bound Estimate	Different-Sex Upper Bound Estimate
Number of eligible part-time employees and graduate students	436	436
Part-time "Member Only" cost	\$108	\$108
Part-time "Member & Spouse" cost	\$283	\$283
Part-time "Member & Family" cost	\$352	\$352
Estimated percentage of employees who would claim DPB	1.3%	1.8%
Estimated number of part-time employees in DP relationships expected to participate in DPBs	5.7	7.8
The difference in annual UH contribution for "member only" vs. "member & spouse" FY09	\$175	\$175
The difference in annual UH contribution for "member only" vs. "family"	\$244	\$244
Percentage of new partners who would elect family option***	46.3%	46.3%
Number of partners who would elect "member & spouse"	3.0	4.2
Number of partners who would elect "family"	2.6	3.6
Added MONTHLY cost from "member & spouse"	\$533	\$738
Added MONTHLY cost from "family"	\$640	\$887
Total Added MONTHLY cost:	\$1,173	\$1,624
Total Added ANNUAL cost:	\$14,076	\$19,490

*** This rate is based upon 2000 U.S. Census data reflecting the proportion of same-sex and different-sex households that have one or more child present (Baumle, Compton, & Poston, 2009).

**Appendix G: Status of Medical Insurance Provision to Domestic Partners at Urban
13 Plus Universities**

University	Provide Health Insurance to Partners	Do Not Provide Health Insurance to Partners	Comments
University of Alabama at Birmingham		X	Confirmed by phone call.
University of Cincinnati	X		Verified by webpage. Documentation available upon request.
Cleveland State University	X		Verified by webpage. Documentation available upon request.
Florida Agricultural & Mechanical University		X	Verified by email inquiry.
Georgia State University		X	Cannot offer due to state law and lack of Board of Regent support, so offers university benefits when they control their own contracts, so no to health but yes to vision, dental, and life insurance.
University of Houston		X	Verified by contact with Human Resources.
University of Illinois at Chicago	X		Verified by webpage. Documentation available upon request.
Indiana University Purdue University, Indianapolis	X		University is a partnership between Indiana University and Purdue University with Indiana University being the managing partner, so benefits are those provided by Indiana University and they offer DPB. Verified by webpage. Documentation available upon request.
University of Massachusetts at Boston	X		Only offer free tuition for domestic partners, but since same sex marriage is legal in the state, full benefits are offered to legally married partners.
University of Memphis		X	Verified by webpage. Documentation available upon request. Stipulation includes benefits only to “legally married spouse as defined under Tennessee law.”
University of Missouri-St. Louis	X		Confirmed by phone call.
University of Missouri-Kansas City		X	Confirmed by email.
University of New Orleans		X	Confirmed by phone call.
City College of New York	X		Verified by webpage. Documentation available upon request.

University of Pittsburgh	X		Verified by webpage. Documentation available upon request.
Portland State University	X		Verified by webpage. Documentation available upon request.
Temple University	X		Verified by webpage. Documentation available upon request, but also note benefit packages at Temple University vary by job classification and whether the position is represented and covered by a collective bargaining agreement.
University of Toledo	X		Verified by webpage. Documentation available upon request.
Virginia Commonwealth University		X	Verified by webpage. Documentation available upon request. Definition of employee's spouse says "the marriage must be recognized as legal in the Commonwealth of Virginia."
Wayne State University	X		Verified by webpage. Documentation available upon request, also includes category of other eligible person.
University of Wisconsin-Milwaukee	X		Verified by webpage. Documentation available upon request.
Totals	13	8	21
Percentages	62%	38%	100%

Appendix H: Status of DPB at Top 25 Tier-One Research Universities

University	Yes – offers same-sex DP medical insurance	No – does not offer same-sex DP medical insurance	Comments
1. U. of California - Berkeley	X		Can enroll only one additional eligible adult, which includes a legal spouse or domestic partner: website documentation available.
2. U. of Michigan – Ann Arbor	X		Uses “other qualified adult” language; website documentation available.
3. U. of Minnesota – Twin Cities	X		All benefits offered, phone call confirmation.
4. U. of Washington - Seattle	X		Has “qualified domestic partnership” benefits; website documentation available.
5. UCLA	X		“One other adult” includes legal spouse or domestic partner: website documentation available.
6. U. of Wisconsin – Madison	X		Effective 01/01/2010: website documentation available.
7. U. of California – San Francisco	X		“legal spouse or domestic partner;” website documentation available.
8. U. of North Carolina – Chapel Hill		X	Does not offer DP medical but does offer DP dental care and life insurance benefits; confirmed by telephone call.
9. U. of California – San Diego	X		“Legal spouse or domestic partner”: website documentation available.
10. U. of Illinois –Urbana-Champaign	X		Domestic partner (same-sex); website documentation available.
11. Ohio State - Columbus	X		Domestic partners: website documentation available.
12. U. of Pittsburgh	X		All benefits include DP: website documentation available.

13. U. of Florida	X		Spouse program offered through State of Florida, domestic partner plan offered through the University of Florida: website documentation available.
14. U. of Texas – Austin		X	Only spouses and common-law spouse with a Declaration of Informal Marriage: domestic partners specifically listed as excluded: website documentation available; employee group working to get DPB added.
15. Penn State – University Park	X		Domestic partner: website documentation available.
16. Texas A&M		X	Website documentation available.
17. U. of Arizona	X		Website documentation available.
18. U. of California - Davis	X		Same-sex and different sex: website documentation available.
19. U. of Virginia		X	Only “legally recognized spouses”; website documentation available.
20. Purdue University	X		Same sex domestic partners, Website documentation available.
21. U. of Maryland – College Park	X		Effective 07/01/09: website documentation available.
22. Michigan State	X		Domestic partner for union represented employees and “other eligible individual” for non-union, non-represented employees: website documentation available.

23. U. of Colorado – Boulder	X		“Same gender domestic partners”: website documentation available.
24. U. of California - Irvine	X		Website documentation available.
25. U. of California – Santa Barbara	X		Same sex or opposite sex, or “one eligible adult family member,” website documentation available.
Totals	21	4	25
Percentages	84%	16%	100%

Appendix I: How to Determine Who Qualifies as a Domestic Partner

Definitions

Domestic partnerships are widely viewed as intimate relationships, between same-sex and different-sex individuals involving emotional and financial ties without the benefits of marriage, whether the couple is prohibited by law or policy from getting married or unwilling or unable to be married for some reason. According to the Employee Benefit Research Institute, the most common definitions of domestic partners contain four or five core elements, including:

1. The partners must have attained a minimum age, usually 18;
2. Neither person is related by blood closer than permitted by state law for marriage;
3. The partners must share a committed relationship;
4. The relationship must be exclusive; and
5. The partners must be financially interdependent (Employee Benefit Research Institute, 2009).

Other policies require that the couple physically reside at the same address, although this can be problematic for some dual-career academic couples. Also, some employers stipulate that the relationship must be at least 6- or 12-months old, although often no such time requirement is made for married couples who are entitled to benefits immediately upon marriage.

Documentation

Different organizations or insurance companies require various documentation of a domestic partnership. It is important to note that requirements for documentation of married couples and same-sex and different-sex domestic partners should be kept similar so as not to introduce further inequalities into the system. Some employers or insurance companies will accept a written or verbal statement of relationship while others require further documentation such as proof of a financial relationship, such as joint names on bank accounts, mortgages, or leases (EBRI, 2009).

Appendix J: Taxation of Domestic Partner Benefits

When an employer provides health insurance for the spouse or dependents of an employee, federal tax law allows the value of the health insurance coverage to be excluded from the employee's gross income. However, because the federal definition of spouse is limited by the Defense of Marriage Act of 1996, non-dependent partners and spouses are treated differently for federal tax purposes.

As a result, when an employer extends health insurance coverage for a non-dependent domestic partner or the dependents of a non-dependent domestic partner of an employee, federal tax law considers the fair market value of that coverage, including the employee's pre-tax contributions, as "imputed income" to the employee. According to a December 2007 report by the Center for American Progress and the Williams Institute, employees with partner health benefits now pay on average \$1,069 per year more in taxes than would a married employee with the same coverage. The only exception is when a domestic partner qualifies as a dependent of the employee under IRS definitions.

Additionally, employees cannot use pre-tax dollars to pay for a non-dependent domestic partner's coverage, precluding them from the full benefits of a Flexible Spending Account, Health Reimbursement Account or Health Savings Account.

Because the imputed income increases the employee's overall taxable income, it also increases the employer's payroll taxes — the federal Social Security (FICA) and unemployment insurance tax (FUTA) that employers pay based on employees' taxable incomes. According to the same CAP/Williams Institute report, employers pay a total of \$57 million per year in additional payroll taxes because of this unequal tax treatment.

As a result, lesbian, gay, bisexual and transgender individuals that secure employer-provided health insurance coverage for themselves and their unmarried, non-dependent partners face a significant tax penalty—one that, depending on the individual and the imputed value of the health benefit, can be in the thousands of dollars per year and result in the individual paying upwards of 50 percent more in federal taxes. Meanwhile, employers that extend partner health benefits pay higher payroll taxes and face the administrative burden of maintaining separate payroll functions for income tax withholding and payroll taxes.

Human Rights Campaign (undated). Taxation of Domestic Partner Benefits. Available at: http://www.hrc.org/issues/marriage/domestic_partners/domestic_partner_benefit_taxation.htm, Retrieved on: September 9, 2009.

Appendix K: An Example of DPB Documents from the University of Wisconsin as an Example

Human Resources & Workforce Diversity Domestic Partner Benefits for University of Wisconsin Employees

2009 Wisconsin Act 28 (state budget bill) expanded the rights of people in both and opposite-sex domestic partnerships. This expansion of rights includes eligibility for some employer-provided benefits. Information and direction is still forthcoming on the extent of the changes.

State Group Health Insurance

Effective January 1, 2010, employees of the University of Wisconsin System will be eligible to cover a same-sex or opposite-sex domestic partner under a family health insurance policy. The Department of Employee Trust Funds (ETF) administers the State Group Health Insurance program and they are currently working on an implementation plan. Employees in a domestic partnership will be able to enroll a domestic partner in health insurance during the Dual Choice health insurance enrollment/change period that runs between October 5-23, 2009 for coverage effective January 1, 2010. Please see ETF's notice regarding upcoming health insurance changes for additional information.

Wisconsin Family Medical Leave Act (WFMLA)

Effective on June 30, 2009 domestic partners are included under the Wisconsin Family and Medical Leave Act (WFMLA). This allows employees to request WFMLA leave to care for a seriously ill domestic partner or the domestic partner's parents. It does not extend to children of the domestic partner unless the children are legally adopted by the employee. There is no domestic partner coverage available under federal FMLA leave provisions.

For detailed information about WFMLA domestic partner rights, see the summary of changes document. Please also see the main FMLA page for additional information.

Domestic Partner Coverage Currently Available to UW System Employees

Domestic Partner coverage is currently available under a variety of UWS-sponsored plans. Please see the summary of domestic partner benefits for more information

Requirements of a Domestic Partnership

There are two different types of domestic partnerships that were outlined in Wisconsin Act 28. The first is a registered domestic partnership this is available only to same-sex couples. The second is an unregistered domestic partnership that is available to both same-sex and opposite-sex couples in a domestic partnership.

To qualify as registered domestic partners, two individuals must meet all the following criteria:

- Each individual is at least 18 years old and competent to enter into a contract;
- Neither individual is married to, or in a domestic partnership, with another;
- The individuals share a common residence;

The individuals are not related by blood in any way that would prohibit marriage under Wisconsin law;

- The individuals are members of the same sex; and
- The couple is registered with the Register of Deeds in their county of residence.

Note: To register, domestic partners must: (a) apply for a declaration of domestic partnership to the County Clerk's Office in the county where they have lived for 30 days prior to the date of application; and (b) file the signed and notarized Declaration in the Register of Deeds Office in the same county.

Resources for More Information

All the requirements regarding the Domestic Partner registry are outlined in newly created Chapter 770, Wis. Stats. The State of Wisconsin Vital Records Office has also created a Domestic Partner Registry FAQ for additional information.

To qualify as unregistered domestic partners (available to same-sex and opposite-sex domestic partnerships), two individuals must meet all of the following criteria:

- Each individual is at least 18 years old and competent to enter into a contract;
- Neither individual is married to, or in a domestic partnership with, another;
- They share a common residence;

Their partnership must not violate Wis. Stats. 765.03, which bars marriage between certain persons based on kinship and divorce;

- They must consider themselves to be members of each other's immediate family;
- They must agree to be responsible for each other's basic living expenses.

ETF will determine what documents will be required to certify a domestic partnership for health insurance purposes. Until ETF releases its certification document, employees should continue to use the current UW System Affidavit of Domestic Partnership (UWS 50) to enroll in any benefits that currently provide domestic partner coverage. Once ETF releases its certification document, it will replace the current UW System Affidavit of Domestic Partnership

The complete text of 2009 Wisconsin Act 28 provides for domestic partner coverage. Chapter 40 of state statute determines who is eligible for employee-sponsored benefits of state employees. The statutes were amended to include domestic partners. The changes to Chapter 40 begin on page 185 of the document. Chapter 770 was added to state statute in order to define domestic partnerships and create a domestic partner registry.

Fair Wisconsin created a domestic partner reference guide as a resource that outlines all of the changes in regards to domestic partnerships. This document was last revised on July 27, 2009. <http://www.uwsa.edu/hr/benefits/dpbenefits.html>. Retrieved July 9, 2009.

Domestic Partner Health Insurance at UW-Madison (June 29, 2009). Available at <http://www.news.wisc.edu/domesticPartnerbenefits>, retrieved August 21, 2009.

Appendix L: Available and Unavailable Benefits to Domestic Partners of UH System Employees

Benefits Currently Available to the Domestic Partners of UH System Employees

Employee Benefit Program	Domestic Partner Coverage Availability	Applications and Information
UH Wellness Center Membership (Central Campus)	Coverage available for employee plus one other adult, which would include domestic partner.	
Protection from discrimination under Title IX	The UH is committed to providing a work and academic environment for employees and students free from all forms of discrimination based on protected categories. Protected categories are race, color, religion, national origin, sex, age, disability, veteran status or sexual orientation.	02.07.01 Title IX Grievances and Other Discrimination Complaints

Benefits Not Available to the Domestic Partners of UH System Employees

Employee Benefit Program	Domestic Partner Coverage Availability	Applications and Information
Medical Insurance through Blue Cross/ Blue Shield	Extend coverage available for domestic partner and eligible children of domestic partner.	
Dental Insurance	Extend coverage available for domestic partner and eligible children of domestic partner. <i>Currently employees pay 100 percent of the premium, so adding DP coverage would be no additional cost to UH</i>	
Individual & Family Group Life Insurance	Extend coverage to include life insurance available for domestic partner and eligible children of domestic partner. <i>Currently employees pay 100 percent of the premium, so adding DP coverage would be no additional cost to UH</i>	
Accidental Death & Dismemberment Life Insurance	Extend coverage to domestic partner and eligible children of domestic partner. <i>Currently employees pay 100 percent of the premium, so adding DP coverage would be no additional cost to UH</i>	

<p>Employee Reimbursement Accounts</p>	<p>If domestic partner meets the IRS definition of a qualified dependent, eligible medical expenses incurred by domestic partner are eligible for reimbursement. A domestic partner must receive over half of his/her support from the employee and reside with the employee to be eligible. Dependent care expenses of a domestic partner's child may also be eligible for reimbursement if the child meets the definition of a qualifying child or relative. Please see the ERA benefits booklet for a more extensive definition of a qualified dependent. <i>Currently this option is 100 percent employee contribution, so adding DP coverage would be no additional cost to UH</i></p>	
<p>Long Term Care Insurance</p>	<p>John Hancock Custom Care II Extend coverage to domestic partner. <i>Currently employees pay 100 percent of the premium, so adding DP coverage would be no additional cost to UH</i></p>	

Policies Not Available to the Domestic Partners of UH System Employees

<p>Family Medical Leave</p>	<p>Extend coverage for a domestic partner and children of domestic partner.</p>	<p>02.02.01 Family and Medical Leave</p>
<p>Using Sick Leave to Care for Domestic Partner during Illness</p>	<p>Update the current policy to include the use of sick leave to care for a domestic partner.</p>	<p>02.02.03 Leave of Absence</p>
<p>Using Sick Leave during Bereavement Leave</p>	<p>Update the current policy to include the use of bereavement leave after the death of a domestic partner.</p>	<p>02.02.03 Leave of Absence</p>

Appendix M: Members of the University Commission on Women, 2009-2010 Academic Year

Lisa Alastuey

Clinical Assistant Professor, Department of Health and Human Performance
College of Liberal Arts and Social Sciences

Carol Barr

Business Administrator, Department of English
College of Liberal Arts and Social Sciences
Past President, Staff Council

Amanda Baumle

Assistant Professor, Department of Sociology
College of Liberal Arts and Social Sciences

Pat Bozeman

Librarian, MD Anderson Library

Elaine Charlson

Executive Associate Vice President for Academic and Faculty Affairs

DeJuena Chizer

Associate Athletics Director

Mark Clarke

Associate Professor, Department of Health and Human Performance
College of Liberal Arts and Social Sciences
President, Faculty Senate

Patrick Daniel

Executive Director, Learning Assessment Services

Kenneth Fomunung

President, Student Government Association

Katherine Frazier

Program Manager, College of Technology

Maria Gonzalez

Associate Professor, Department of English
College of Liberal Arts and Social Sciences

Elizabeth Gregory

Professor, Department of English
Director of Women, Gender and Sexuality Studies Program
College of Liberal Arts and Social Sciences

Sara Haynes

Manager, Donor and Alumni Records, University Advancement

Sherry Howard

Director, Child Care Center

Holly Hutchins (Faculty Chair of the Commission)

Assistant Professor, Department of Human Development and Consumer Science
College of Technology

Tonja Jones

Vice President for Constituent Relations, University of Houston Alumni Association

Patrick Leung

Professor, Graduate College of Social Work

Ann McFarland

Director, Office of Community Projects, Graduate College of Social Work
President, Staff Council

Monica McHenry

Associate Professor, School of Communications
President-Elect, Faculty Senate

Beverly McPhail (Co-Secretary of the Commission)

Director, Women's Resource Center

Monica Morgan

Director, Office of Human Resources

Kim Ngo

Representative, Student Government Association

Allison Odom-Bashir

Office of Affirmative Action/Equal Employment Opportunity

Cynthia Romero (Staff Chair of the Commission)

Trainer, Information Technologies, Office of Human Resources

Dana Rooks

Dean, University Libraries

Ashleigh Scinta

Representative, Student Government Association

Rebecca Szwarc (Co-Secretary of the Commission)

Administrative Assistant, Office of Residential Life and
Housing

Robert Wimpelberg

Dean, College of Education

Jamillia Wren

Representative, Student Government Association

UNIVERSITY of **HOUSTON**