# EMPLOYEE BENEFITS GUIDE

1月1日



**HUMAN RESOURCES** 

# 2024-2025

UDEL.EDU/HR

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NOTE: Plan design features and rates are subject to change.

If there is any conflict between the contents of this summary booklet and a plan document, the plan document will prevail.

# 2024-2025 Benefits

**EVEN THOUGH COSTS ARE RISING,** the University continues to offer excellent benefit choices and pays an average of 91% of the cost for health and 100% of the cost for dental insurance premiums for employees.

BEGINNING JULY 1, 2024, the University of Delaware has the following benefit changes:

**HEALTH PLAN PREMIUM** rates will increase for health plan members. Depending on the health plan and tier coverage the employee elects, the increase could range from \$9.36 to \$91.84 per month. The increase in rates is to ensure there are sufficient funds to cover significantly higher healthcare and pharmaceutical costs.

HIGHMARK COMPREHENSIVE PPO PLAN members will now have a \$50 copay for in-network and out-of-network air ambulance services (previously no copay or coinsurance).

HIGHMARK COMPREHENSIVE PPO PLAN, AETNA CDH GOLD PLAN, AND AETNA HMO PLAN members will have a reduction in copays or coinsurance for certain services related to a mental health or substance use disorder diagnosis.

ALL UD NON-MEDICARE HEALTH PLANS, there will be benefit enhancements for coverage for cooling caps, mastectomy bras, and wigs/hair pieces for members when medically necessary.

COVID-19 BENEFIT ENHANCEMENTS will be discontinued after June 30, 2024.

Visit the <u>Quick Reference Chart</u> for further details.



# Options at a glance **ENROLLMENT**

### DURING THE OPEN ENROLLMENT PERIOD, EMPLOYEES MAY:

- Change to a different health plan option;
- Enroll in a health, dental or vision plan if you declined coverage previously;
- Add or remove dependents (i.e., change your coverage level);
- Drop coverage for health, dental or vision insurance; and
- Change to a different level of disability and/or life insurance.

The benefits plan year begins July 1 and ends June 30. Benefits Open Enrollment is typically held in May. During this time, employees can change their benefits (with the exception of Flexible Spending Accounts), check their benefit costs and confirm their enrollment for July 1 at <u>www.udel.edu/flexnet</u>.

The online FlexNet process includes detailed instructions for completing your Open Enrollment elections along with information about documents that may be required if you are covering your spouse and/or adding dependents for the first time to your plans for the new benefits plan year.

Be sure to forward all required documents before the close of the Open Enrollment Period to <u>hrhelp@udel.edu</u>.

IF YOU DO NOT CONFIRM OR CHANGE YOUR ELECTIONS DURING OPEN ENROLLMENT, your benefit elections for health, dental, vision, long-term disability and employee life insurance will carry over into the new plan year. You can change your coverage only if you have an eligible family status change, as defined by federal law.

If during the year, you experience a qualifying life event, you must submit a Family Status and Benefits Change Form within 30 days of the event to enroll or make changes. If you fail to submit the required documents within 30 days of the event, you must wait until the next Open Enrollment period to apply for coverage.

#### www.udel.edu/flexnet

#### QUALIFYING LIFE EVENT DOCUMENT GUIDE

#### CHANGE IN MARITAL STATUS Marrigae

- → Marriage/Civil Union Certificate
- → State of Delaware's Spousal Coordination form
- → Social Security Card

#### Divorce

→ Divorce Decree

### CHANGE IN NUMBER OF DEPENDENTS

#### Birth or Adoption

- → Birth announcement/Birth Certificate
- → Adoption Certificate
- Dependent Coordination form (DCOB)
- → Social Security Card

#### Death

→ Death Certificate

#### CHANGE IN EMPLOYMENT STATUS

Employee or spouse changes status (eligible to ineligible and vice versa)

- → Loss of employment/coverage letter listing the effective date of loss coverage
- → Letter of employment listing the effective date of new health insurance
- → Spousal Coordination of Benefits Form (if you are enrolled in a UD health insurance plan at the "employee & spouse" or "family" coverage level and there is a change in your spouse's employment)
- → Marriage/Civil Union Certificate
- → Social Security Card

All documents should be submitted to: HR-Benefits, Second Floor-Suite 201, 550 S. College Ave., Newark, DE 19713. You may also submit your documents by using our Secure <u>Document Submission For</u>m.

### **OTHER BENEFIT REMINDERS**

**COMPSYCH® GUIDANCERESOURCES®** is the administrator for UD's Employee Assistance Program. This program is available exclusively for UD employees and their dependents. The program offers resources to consult whenever and wherever you need them. Members will have a toll-free number at 877-527-4742 directly for 24/7 access to a GuidanceConsultant<sup>®</sup>. You also have access to the website at <u>www.guidanceresources.com</u> (Web ID: State of Delaware), mobile app to consult articles, podcasts, videos, webinars and other helpful tools.

HINGE HEALTH VIRTUAL EXERCISE THERAPY PROGRAM is a no cost virtual exercise therapy program available to Aetna and Highmark Delaware health plan members, and their spouse/dependents over the age of 18. <u>https://dhr.delaware.gov/benefits/msp/index.shtml</u>

**SURGERY PLUS.** Individuals enrolled in a State of Delaware Aetna or Highmark Delaware non-Medicare health plan are automatically enrolled in Surgery Plus. This free benefit is a supplemental benefit for non-emergency, planned surgeries, which provides high-quality care, concierge-level member service and lower costs. Bariatric surgery coverage is available exclusively through Surgery Plus. <u>https://dhr.delaware.gov/benefits/surgery-plus/index.shtml</u>

A STUDENT LOAN FORGIVENESS PROGRAM, brought to you through TIAA and Savi, is a path that could help reduce your monthly student loan payment. Visit the Voluntary Benefits webpage to sign up for webinars and find out more about the TIAA and Savi program <u>https://www.udel.edu/faculty-staff/human-resources/total-rewards/voluntary-benefits/</u>



# Overview of **BENEFITS**

## UD-supported programs provide opportunities and flexibility for you to tailor benefits to meet your personal needs.

**UNIVERSITY CONTRIBUTIONS.** The University provides full-time employees with a benefits allowance (or Flex Credit) called "UDollars." This is the University's contribution, and it covers a large portion of the premium costs for health, dental, vision, life and disability insurance.

Employees are able to use UDollars provided by the University to assist in paying for the benefits selected. If the total cost of the options chosen exceeds the UDollars paid by the University, employees pay the difference in pre-tax dollars. If the total cost of the benefits selected is less than the UDollars provided, employees receive the difference as taxable cash.

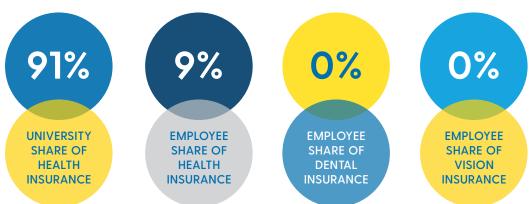
For full-time employees, the University's health plan coverage contribution averages 91 percent of the total premium, depending on the plan and coverage tier. The University also pays the cost of "employee-only" vision, full cost of dental coverage, standard long-term disability, and life insurance equal to the elected level of coverage.

**WHERE TO VIEW PLAN INFORMATION.** A detailed Summary Plan Description for each of our plans is available at <u>www.udel.edu/faculty-staff/human-resources/total-rewards/health-and-life-insurance/</u>.

**HOW TO VIEW YOUR BENEFITS.** The online Flex Benefits View, at <u>www.udel.edu/webviews</u>, shows the total cost of the benefits, the amount the University contributes toward your benefits (Flex Credit/UDollars) and your before-tax deductions.

**BENEFIT PLAN ID.** With initial enrollment, benefit plan identification cards for health (Aetna or Highmark Delaware), prescription (CVS Caremark) and vision (NVA) are mailed to the home address within 10-14 business days. Present these identification cards to your provider when using your benefits. MetLife, the University's dental plan provider, does not issue employee ID cards. Your MetLife dental membership ID is your UD employee ID number. The University's dental group plan number is 95140.

Learn more: WWW.UDEL.EDU/FACULTY-STAFF/HUMAN-RESOURCES/TOTAL-REWARDS/



Please take the time to learn about your benefits, and select plans and options that best suit your needs.

### New hires and newly benefited **EMPLOYEFS**

NEW HIRES AND NEWLY BENEFITED EMPLOYEES must elect an option for each of the benefit plans listed in the chart below. Elections must be made within 30 days of the hire date.

ELIGIBILITY DATE. If your hire date is the first day of the month, your benefits will be effective the first day of the month in which you are hired. If your hire date is after the first day of the month, your benefits will be effective first day of the following month.

**RETIREMENT INCOME.** To provide income in retirement, the University contributes to the 403(b) Retirement Savings Plan for Faculty and Exempt Staff, and to the State Employees' Pension Plan for most Non-Exempt Staff.

TIAA 403(b) enrollment is not automatic. The effective start date is as soon as administratively possible, usually 1-2 pay periods after date of hire and enrollment.

State of Delaware Employees' Pension Plan enrollment is automatic upon hire for full-time hourly and most non-exempt staff.

HOW TO ENROLL. Soon after your hire date or transfer to a benefits-eligible position, HR-Benefits will send an email that provides you with specific instructions about enrollment in UD employee benefit plans. The email will include links to online plan information, required documents and the enrollment system Flexnet.

#### ADDITIONAL INFORMATION

- If you are covering your spouse under your health plan, you must complete a Spousal Coordination of Benefits Form.
- Your benefits elections cannot be processed until all required documents are received.
- If you choose to waive health insurance, you must complete the Waiver of Medical Insurance and provide a copy of your current insurance card.

COVERAGE	PLAN OPTIONS	COVERAGE TIERS
Health Insurance <sup>1</sup>	Highmark Delaware First State Basic, Aetna HMO Highmark Delaware Comprehensive PPO, Aetna CDH Gold	Employee Only Employee and Spouse Employee and Child(ren)
Dental	MetLife Dental	Family
Vision	National Vision Administrators (NVA)	Waive Coverage <sup>2</sup>
Long-Term	60 percent of Salary Replacement (Standard)	Standard Option
Disability	66 2/3 percent of Salary Replacement (High)	High Option
Life Insurance	MetLife Group Employee Basic Life	\$10,000 \$50,000 2 times base annual salary (up to \$1,000,000)
	Optional Employee Life Insurance <sup>3</sup>	Voluntary Enrollment through MetLife
	Dependent Life Insurance <sup>3</sup>	Voluntary Enrollment through MetLife
Flexible Spending	FSA Health Care	Voluntary Enrollment upon hire
Accounts	FSA Dependent (Day) Care	Waive

#### RENEFIT DI AN AND ENDOLI MENT ODTIONS AT A GLANCE

<sup>2</sup> Employees who waive coverage will receive credits: Medical-\$350/year; Dental-\$100/year; Vision-\$0 Credit

<sup>3</sup> Enroll in Optional Life Insurance directly through MetLife



• It is your responsibility to complete the Beneficiary Designation Form for the Basic Life Insurance and send it directly to MetLife.

#### **EMPLOYEE BASIC GROUP LIFE INSURANCE**

Enrollment in Employee Basic Group Life Insurance is mandatory. Upon hire, all new employees must make an election during the benefits enrollment process. Employees may choose one of three University-paid Basic Life options:

- \$10,000; \$50,000; or 2 times annual base salary (the maximum coverage is \$1,000,000).
- Life insurance will be defaulted to 2 times annual base salary if no election is made.
- Group Basic Life Insurance is effective on your benefits eligibility date.

#### OPTIONAL LIFE INSURANCE FOR NEWLY HIRED OR NEWLY BENEFITED EMPLOYEES

New hires and newly benefited employees may enroll for coverage up to the lesser of: (1) 8 times base annual salary; or (2) \$500,000, without a Statement of Health (SOH) if they enroll within 30 days of their hire date. Enrollments outside of the 30-day enrollment period will require a SOH. Current participants requesting an increase greater than 1 times base annual salary will be required to provide a SOH.

If you are a new employee, a SOH will also be required for a spouse, if enrolling for coverage greater than \$30,000. If coverage is less than \$30,000, no SOH is required as a new employee.

#### **IF YOU DO NOT ENROLL**

New employees who do not enroll for benefits within the first 30 days of their hire date will have their benefits defaulted to the following:

#### HEALTH

Employee only Highmark Delaware First State Basic

**DENTAL** Employee only

VISION No coverage

LONG-TERM DISABILITY Standard

#### **EMPLOYEE LIFE INSURANCE** 2X benefits base salary

#### FLEXIBLE SPENDING ACCOUNTS No coverage

THE NEXT OPPORTUNITY TO ENROLL WILL BE THE NEXT OPEN ENROLLMENT PERIOD OR WITHIN 30 DAYS OF A QUALIFYING LIFE EVENT.

NOTE: THE BENEFITS PLAN YEAR BEGINS JULY 1 AND ENDS JUNE 30. BENEFITS OPEN ENROLLMENT IS TYPICALLY HELD IN MAY.

# **BENEFIT RATES**

Group Health Insurance Program N	ew Rates Effective	e July 1, 2024	_
	Total Per Pay Rate	UD Pays	Employee Pays
Highmark Delaware First State Basic			
Employee	\$551.03	\$528.99	\$22.04
Employee & Spouse	\$1,140.06	\$1,094.46	\$45.60
Employee & Child(ren)	\$837.62	\$804.12	\$33.50
Family	\$1,425.13	\$1,368.13	\$57.00
Aetna CDH Gold			
Employee	\$570.31	\$541.80	\$28.51
Employee & Spouse	\$1,182.49	\$1,123.37	\$59.12
Employee & Child(ren)	\$871.33	\$827.77	\$43.56
Family	\$1,502.25	\$1,427.14	\$75.11
Aetna HMO			
Employee	\$575.27	\$537.88	\$37.39
Employee & Spouse	\$1,212.89	\$1,134.05	\$78.84
Employee & Child(ren)	\$880.01	\$822.81	\$57.20
Family	\$1,513.41	\$1,415.04	\$98.37
Highmark Delaware Comprehensive PPO			
Employee	\$629.08	\$545.73	\$83.35
Employee & Spouse	\$1,305.40	\$1,132.44	\$172.96
Employee & Child(ren)	\$969.52	\$841.06	\$128.46
Family	\$1,631.93	\$1,415.70	\$216.23
Dental Plan Administered by MetLife*			
Employee	\$23.41	\$23.41	\$0.00
Employee & Spouse	\$47.11	\$47.11	\$0.00
Employee & Child(ren)	\$52.72	\$52.72	\$0.00
Family	\$76.61	\$76.61	\$0.00
Vision Plan Administered by National Vision Administrators (NVA)*			
Employee	\$2.21	\$2.21	\$0.00
Employee & Spouse	\$4.75	\$2.21	\$2.54
Employee & Child(ren)	\$3.58	\$2.21	\$1.37
Family	\$6.53	\$2.21	\$4.32

\*University of Delaware retirees are responsible for the Total Monthly Premium. There is no University contribution toward the cost of vision coverage for retirees or their eligible family members.

#### View rates online at https://www.udel.edu/faculty-staff/human-resources/total-rewards/rates/

### HEALTH PLAN COMPARISON CHART

### EFFECTIVE JULY 1, 2024

Plan Type	Highmark Delawa	re First State Basic	Aetna (	CDH Gold	
Plan Options	Preferred Provider	Organization (PPO)	Preferred Provider	Organization (PPO)	
Primary Care Provider (PCP) Selection	Recommended		Recom	mended	
Plan Feature	In-Network	Out-of-Network	In-Network	Out-of-Network	
Preventive Care/ Screening/Immunization (age, gender and risk parameters may apply)	100% covered, not subject to deductible	30% coinsurance, not subject to deductible	100% covered, not subject to deductible	30% coinsurance after deductible	
Deductible (Per plan year)	\$500 per individual/ \$1,000 per family	\$1,000 per individual/ \$2,000 per family	\$1,500 per individual/ \$3,000 per family	\$1,500 per individual/ \$3,000 per family	
Health Reimbursement Account (HRA)	N/A	N/A	\$1,250 per individual/ \$2,500 family	\$1,250 per individual/ \$2,500 family	
Out-of-Pocket Maximum (including copays and deductibles)	\$2,000 per individual/ \$4,000 per family	\$4,000 per individual/ \$8,000 per family	\$4,500 per individual/ \$9,000 per family	\$7,500 per individual/ \$15,000 per family	
Prenatal and Postnatal Care	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	
24/7 Nurse Line	Yes, n	o cost	Yes, no cost		
Primary Care Visit to treat an injury or illness (In-person or virtual)	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	
Telemedicine (Virtual Doctor Visits)	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	
Urgent Care Visit	100% covered after \$25 copay per visit	100% covered after \$25 copay per visit	10% coinsurance after deductible	30% coinsurance after deductible	
Emergency Room	10% coinsurance after deductible	10% coinsurance after deductible	10% coinsurance after deductible	10% coinsurance after deductible	
Chiropractic Care (Requires medical necessity) Note: No visit maximum for treatment of back pain	10% coinsurance after deductible for up to 30 visits per plan year	25% coinsurance after deductible for up to 30 visits per plan year	10% coinsurance after deductible for up to 30 visits per plan year	25% coinsurance after deductible for up to 30 visits per plan year	
Physical/Occupational Speech Therapy (Requires medical necessity) Note: No visit maximum for treatment of back pain	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible No visit limit or medical necessity review for behavior health and substance abuse disorder diagnosis	30% coinsurance after deductible No visit limit or medical necessity review for behavior health and substance abuse disorder diagnosis	
Specialist Visit (In-person or virtual)	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	
Lab Work (Blood Work) Note: Lab Work at a non- preferred non-hospital affiliated lab may not be covered	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	

Aetna HMO		Highmark Delaware	Comprehensive PPO	
Health Maintenance Organizo	ation (HMO)	Preferred Provider	Organization (PPO)	
Required		Recommended		
In-Network	Out-of-Network	In-Network	Out-of-Network	
100% covered	Not covered	100% covered	20% covered after deductible	
N/A	N/A	N/A	\$300 per individual/ \$600 per family	
N/A	N/A	N/A	N/A	
\$4,500 per individual/ \$9,000 per family	N/A	\$4,500 per individual/ \$9,000 per family	\$7,500 per individual/ \$15,000 per family	
100% after \$25 initial copay (inpatient room and board copays do apply to hospital deliveries/birthing centers)	Not covered	100% (inpatient room and board copays do apply to hospital deliveries/birthing centers)	20% coinsurance after deductible	
Yes, no cost		Yes, r	no cost	
\$15 copay per visit	Not covered	\$20 copay per visit	20% coinsurance after deductible	
\$0 copay per visit for acute issues and behavioral health visits	Not covered	\$0 copay per visit for acute issues behavioral health visits	20% coinsurance after deductible	
\$25 for dermatology visit				
\$15 copay per visit	Not covered	\$20 copay per visit	20% coinsurance after deductible	
\$200 copay per visit (waived if admitted)	\$200 copay per visit (waived if admitted)	\$200 copay per visit (waived if admitted)	\$200 copay per visit (waived if admitted)	
Lesser of \$15 copay or 20% coinsurance (Referrals required through PCP)	Not covered	15% coinsurance for up to 30 visits per plan year 0% coinsurance for behavioral health and substance abuse disorder diagnosis	20% coinsurance after deductible for up to 30 visits per plan year	
20% coinsurance for up to 45 visits per illness/injury (Referrals required by PCP)	Not covered	15% coinsurance	20% coinsurance after deductible	
No visit limit and lesser of \$15 copay or 20% coinsurance for behavioral health and substance abuse disorder diagnosis		0% coinsurance for behavioral health and substance abuse disorder diagnosis		
\$25 copay per visit (Referrals required for certain services through PCP)	Not covered	\$30 copay per visit	20% coinsurance after deductible	
LabCorp and Quest Diagnostics (Preferred): \$10 copay per visit	Not covered	In-Network Non-Hospital Affiliated Preferred Lab: \$10 copay per visit	20% coinsurance after deductible	
Hospital/Other Lab Facility: \$50 copay per visit		Hospital/Other Lab Facility: \$50 copay per visit 0% copay per visit for behavioral health and substance abuse disorder diagnosis		

#### 2024-2025 Benefits Guide

### **HEALTH PLAN COMPARISON CHART**

### **EFFECTIVE JULY 1. 2024**

Plan O	Options	Highmark Delawa	re First State Basic Plan	Aetna CDH	Gold Plan	Aetna H	IMO Plan	Highmark Delaware Co	omprehensive PPO Plan
		In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Basic Imagin (i.e., X-Ray,	ng/Radiology Ultrasound)	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	Non-Hospital Affiliated Freestanding Facility Preferred: \$0 copay per visit (Referrals required through PCP)	Not covered	Non-Hospital Affiliated Freestanding Facility Preferred: \$0 copay per visit	20% coinsurance after deductible
						Hospital Affiliated Facility: \$50 copay per visit		Hospital Affiliated Facility: \$50 copay per visit***	
Radio (i.e., MRI, CT		10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	Non-Hospital Affiliated Freestanding Facility Preferred: \$0 copay per visit	Not covered	Non-Hospital Affiliated Freestanding Facility Preferred: \$0 copay per visit	20% coinsurance after deductible
						Hospital Affiliated Facility: \$100 copay per visit		Hospital Affiliated Facility: \$100 copay per visit***	
Mental health, behavioral health, and substance	Outpatient Services	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	\$15 copay per visit	Not covered	\$20 copay per visit Intensive Outpatient Care 100% covered	20% coinsurance after deductible
abuse	Inpatient Services	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	\$100 copay per day with max of \$200 per admission	Not covered	\$100 copay per day with max of \$200 per admission	20% coinsurance after deductible
Outpatier	nt Surgery	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	Non-Hospital Affiliated Ambulatory Center (Preferred): \$50 copay per visit	Not covered	Non-Hospital Affiliated Ambulatory Surgery Center (Preferred) \$50 copay per visit	20% coinsurance after deductible
						Hospital Facility: \$150 copay per visit		Hospital Facility: \$150 copay per visit	
Hospital A	Admission	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	 \$100 copay per day with max of \$200 per admission	Not covered	\$100 copay per day with max of \$200 per admission	20% coinsurance after deductible
replacement)	opedic ement/knee Note: Requires thorization	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	COE Facility* Preferred: \$100 copay per day; \$200 copay max per admission	Not covered	COE Facility* Preferred: \$100 copay per day; \$200 copay max per admission	20% coinsurance after deductible
						Non-COE Facility: \$500 copay per admission		Non-COE Facility: \$500 copay per admission	
,	I and lumbar al and lumbar	10% coinsurance after deductible	10% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	COE Facility* (Preferred): \$100 copay per day; \$200 copay max per admission	Not covered	COE Facility <sup>*</sup> Preferred: \$100 copay per day; \$200 copay max per admission	20% covered after deductible
procedures) N	y/discectomy lote: Requires a horization					Non-COE Facility: \$500 copay per admission		Non-COE Facility: \$500 copay per admission	
	i <b>atric</b> uires a prior	Not covered under Highmark	Not covered under Highmark	Not covered under Aetna	Not covered under Aetna	Not covered under Aetna	Not covered under Aetna	Not covered under Highmark	Not covered under Highmark
	rization	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit	Required through SurgeryPlus benefit
(For Highmar not apply to bone marro		COE Facility* Preferred: 10% coinsurance after deductible	30% coinsurance after deductible	COE Facility* Preferred: 10% coinsurance after deductible	30% coinsurance after deductible	COE Facility* Preferred: \$100 copay per day; \$200 copay max per admission	Not covered	COE Facility* Preferred: \$100 copay per day; \$200 copay max per admission	20% covered after deductible
	uires a prior rization	Non-COE Facility: 30% coinsurance after deductible		Non-COE Facility: 30% coinsurance after deductible		Non-COE Facility: Not covered		Non-COE Facility: 20% coinsurance	

\*Aetna and Highmark Delaware have designated certain healthcare facilities within their provider network as Centers of Excellence, or simply COE Facilities. COE Facilities have been identified as delivering high-quality services and superior

\*\*Members are encouraged to review the Highmark or Aetna plan documents for details regarding coverage  $^{\ast\ast\ast}$  0% copay per visit for behavioral health and substance abuse disorder diagnosis

### HOW TO VIEW YOUR PAY STUB

On your pay stub, you will see the University's benefits contribution shown as Flex Credit UDollars under Hours and Earnings. You will also see the full Before-Tax Deductions for Medical, Dental, Vision Care, Employee Life and Long-Term Disability. To calculate your per-pay out-of-pocket cost for these benefits, subtract the Flex Credit-UDollars from the Before-Tax Deductions.

- If your deductions are greater than the Flex Credit-UDollars, you are paying the difference with a pre-tax contribution.
- If the Flex Credit-UDollars amount is greater than the pre-tax deductions, you are receiving the difference in your taxable income.

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Vision Dredit	your ben	efits	185.55	5.00	155.55	DE BWT		MAL 55	.56
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## **HEALTH INSURANCE**

**THE UNIVERSITY PROVIDES HEALTH INSURANCE PLANS** through Aetna and Highmark Delaware. Plan options include Health Maintenance Organization (HMO), Preferred Provider Organization (PPO) and Consumer Directed Health (CDH). For detailed information on each plan, see the Comparison of University Health Care Plans chart.

#### **CONSIDERATIONS WHEN CHOOSING A PLAN**

#### HIGHMARK DE FIRST STATE BASIC

- You can see any provider
- Least expensive premiums
- Deductible applies

#### **AETNA HMO**

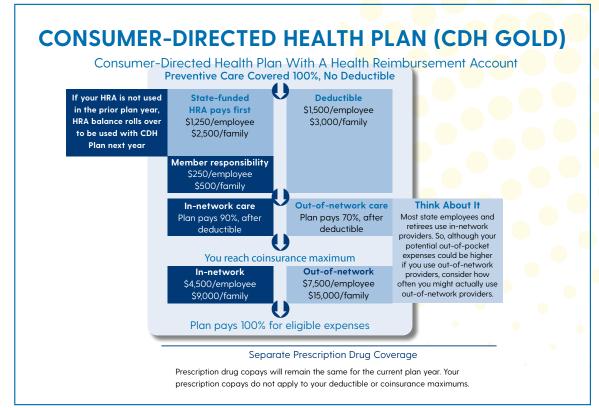
- Requires HMO primary care physician
- Large national directory of innetwork providers
- Requires referrals for specialists
- No coverage for out-of-network doctors or services
- No deductibles, only copays

#### AETNA CDH GOLD

- You can see any provider
- Comes with employer-funded HRA that covers most of high deductible
- HRA works seamlessly with PPO coverage; no extra paperwork
- Unused HRA \$\$ roll over to next year
- HRA is pro-rated based on date of hire

#### HIGHMARK DE COMPREHENSIVE PPO

- You can see any provider
- No deductibles for in-network services, only copays
- Low deductible for out-of-network services
- Employee premiums are 2 to 3.5 times more expensive than the other plans



### CVS Caremark Drug Plan PRESCRIPTION DRUG PLAN

#### IF YOU ELECT ANY HEALTH PLAN, YOU ARE AUTOMATICALLY ENROLLED IN CVS

CAREMARK, which manages the prescription drug program through the State of Delaware.

- Prescriptions may be filled by any participating retail pharmacy for the copays listed.
- Some retail pharmacies fill a 90-day supply of medications at the same rate as CVS Caremark Home Delivery. A listing of the participating pharmacies can be found at <a href="https://www.caremark.com">https://www.caremark.com</a>.
- CVS Caremark representatives are available 24/7. Pharmacists are also available around the clock for medication consultations. Call 833-458-0835 for assistance.

Members must obtain maintenance medications as 90-day fills at a 90-day participating pharmacy or directly from CVS Caremark Home Delivery to avoid paying a penalty after a third 30-day fill. Information on this program, a list of 90-day participating pharmacies, and information on CVS Caremark Home Delivery may be obtained at <a href="https://dr.delaware.gov/benefits/cvs/medication-options.shtml">https://dr.delaware.gov/benefits/cvs/medication-options.shtml</a>.

#### PRESCRIPTION DRUG COPAY STRUCTURE

	Generic <sup>1</sup>	Preferred Brand <sup>2</sup>	Non-Preferred Brand <sup>3</sup>
30-Day Supply	\$ 10.00	\$32.00	\$60.00
90-Day Supply	\$20.00	\$64.00	\$120.00

The University's list of covered medications (formulary) may change periodically. CVS Caremark reviews and updates the plan's list of covered medications every year to ensure that the plan is providing the most effective medications for members at the most reasonable cost.

- <sup>1</sup> Tier one covers generic products
- <sup>2</sup> Tier two covers preferred brand name (formulary) drugs
- <sup>3</sup> Tier three covers non-preferred brand (non-formulary) drugs.

Learn more at https://dhr.delaware.gov/benefits/cvs/index.shtml

## **DID YOU KNOW?**

#### SUPPLEMENTAL LIFE COVERAGE

With your Supplemental Life coverage, you get expert legal guidance at no extra cost. Simply contact a MetLife Client Services Representative to get started or visit the <u>pdf</u>.

#### TIAA

TIAA offers a variety of resources to help you plan for your future. By visiting <u>www.tiaa.org/udel</u>, you can view informational on-demand webinars, set up your beneficiaries, learn more about investment options and more. One-on-one private consultations with a TIAA retirement plan advisor are available at <u>http://www.udel.edu/0011989</u>.

#### METLIFE

Metlife offers additional support when enrolled in Life Insurance coverage. Grief counseling services are available with life insurance coverage at no extra cost. Username: metlifeassist, Password: support, <u>Metlifegc.lifeworks.com</u>.

Easily create a will; living will or power of attorney at www.willscenter.com.

# Spousal Coordination of **BENEFITS**

THERE ARE TWO IMPORTANT QUESTIONS TO CONSIDER before enrolling your spouse in a health plan with prescription coverage:

- → Is your spouse employed full-time or retired from an employer that offers health insurance?
- → Is your spouse responsible for 50% or less of the premium for the lowest active or retiree health plan available to them?

If you answered "Yes" to both of these questions, then your spouse is most likely required to enroll in his or her employer's coverage.

IMPORTANT: If you cover your spouse in one of the health plans, you **MUST** complete a Spousal COB Form during initial enrollment, EACH YEAR during Open Enrollment and any time their employment or insurance status changes. Failure to complete the Spousal COB Form and/or provide additional documentation when required may result in a reduction of spousal benefits.

Learn more at: https://dhr.delaware.gov/benefits/cob/groups.

### **DEPENDENT COORDINATION OF BENEFITS**

IN ACCORDANCE WITH THE GROUP MEDICAL INSURANCE PROGRAM ELIGIBILITY AND ENROLLMENT RULES, Dependent Coordination of Benefits forms must be completed for each dependent child to determine if the dependent is covered by any other health plan, regardless of age, upon:

- Enrollment
- Any time coverage changes, or
- Upon request by the Statewide Benefits Office

You can find additional information and the forms required by Aetna and Highmark Delaware by visiting the appropriate link below (select the carrier administering your health plan benefits):

https://www.udel.edu/faculty-staff/human-resources/forms.

Please return your completed form to HR Benefits by using our Secure Document Submission site; we will forward the form to Aetna or Highmark Delaware based on your health plan enrollment.

#### YOUR SPOUSE MIGHT NOT BE REQUIRED TO ENROLL IN HIS/HER OWN INSURANCE IF:

- ➔ Your spouse is not working full time;
- → Your spouse's employer does not offer health coverage; or
- → Your spouse's employer requires a contribution of more than 50% of the premium for the least expensive, employee-only (or retiree-only) plan offered.

#### COORDINATION OF BENEFITS WHEN YOUR SPOUSE IS RETIRED

Spouses who are retired or will retire from an employer who offers retiree health insurance coverage are required to enroll in their employer's retiree health plan under certain circumstances. Coverage with the University may be elected as secondary in those cases.



### MetLife DENTAL INSURANCE

**THE UNIVERSITY PROVIDES DENTAL INSURANCE** to full-time employees and their families. Dental insurance is administered through MetLife Insurance Company.

**THE UNIVERSITY PAYS THE ENTIRE COST** of this program for full-time benefits-eligible employees and their eligible family members enrolled in the program. To use the benefit, bring a claim form to your appointment and notify your dentist that you participate in MetLife's Dental Program, Group Number 95140. **MetLife does not issue member ID cards.** 

**THE UNIVERSITY OFFERS THE METLIFE PREFERRED DENTIST PROGRAM (PDP)** as a way to reduce your dental costs. If your dentist participates in the program, he/she contracts with MetLife to charge reduced fees for certain services. This translates into lower out-of-pocket expenses for you.

Remember that the MetLife PDP is a voluntary option within the University's Dental Plan. It is your choice to use a participating or non-participating dentist.

#### SUMMARY OF BENEFITS Dental plan year is January 1 - December 31

**PREVENTATIVE**\*: 100% Coverage, no deductible Max. benefit: \$1,750/person annually, calendar year (January-December)

**BASIC RESTORATIVE CARE:** 80%\*\* Coverage, \$25 person or \$75/family deductible. Max. benefit \$1,750/person annually

MAJOR RESTORATIVE CARE: 50%\*\* Coverage, deductible applies. Max. benefit \$1,750/person annually

ORTHODONTIA: 50%\*\* Coverage, no deductible. Max. benefit \$1,750/person lifetime

\* One exam/cleaning per 6-month period.

\*\* Of Participating Dental Providers (PDP) Fee when used in-network; of Reasonable & Customary (R&C) charge when used out-of-network.

VISIT www.udel.edu/faculty-staff/human-resources/total-rewards/health-and-life-insurance/dental/.

## DID YOU KNOW?

#### Flexible Spending Accounts-ASI Flex

**FSA Store** FSA Store is stocked with thousands of FSA-eligible products. The site only offers FSA-eligible products, there is no guessing required as to whether the product is eligible for reimbursement. To learn more, go to <u>asiflex.com</u> and visit the: <u>FSA Store</u>.

#### Employee Assistance Program

**ComPsych®** a FREE program available exclusively for State of Delaware Group Health Plan non-Medicare members and their dependents. The GuidanceResources® Program is provided by ComPsych®Corporation and offers counseling, legal and financial consultation, work-life assistance and crisis intervention services to all our employees and their household family members. Web ID: State of Delaware or call 877.527.4742. <u>https://www.guidanceresources.com/</u>

# National Vision Administrators VISION INSURANCE

#### THE UNIVERSITY PROVIDES A COMPREHENSIVE VISION PLAN TO FULL-TIME

**EMPLOYEES AND THEIR FAMILIES** that can include eye examinations, frames/lenses or contact lenses and other vision-related expenses. The vision plan is administered through National Vision Administrators (NVA), which boasts a national provider network of more than 40,000 locations, including ophthalmologists, optometrists and optical companies.

THE UNIVERSITY COVERS 100% OF THE PREMIUM for full-time employees. Benefits for dependents and retirees are voluntary and are available at an additional group-rate cost.

**BENEFITS INCLUDE IN-NETWORK OR OUT-OF-NETWORK**. You can select an in-network provider and receive in-network benefits at the time of service. You may also use out-of-network services by paying the out-of-network provider in full for all services and materials. To receive reimbursement, you must submit an itemized invoice or receipt from your provider (along with a completed out-of-network claim form) to NVA Claims Services. You will be reimbursed according to the out-of-network schedule of reimbursements, less any applicable copay amount(s). Please enter Group/Sponsor Number 51942000001 to search for NVA providers.

NVA SMART BUYERS™: THE CONSUMER'S ONLINE GUIDE TO VISION BENEFITS. The NVA

Smart BuyerSM program provides you with the tools you need to become an educated consumer of vision care services and eyewear. It's the only source that integrates your vision benefit coverage with the unbiased information you'll need to maximize your vision benefit and reduce your out-of-pocket expense. Call the Member Services toll-free line, 800-672-7723, or look for additional information on the NVA website at <u>www.e-nva.com</u>.

#### SUMMARY OF VISION BENEFITS

SERVICE	BENEFITS IN-NETWORK	BENEFIT OUT-OF-NETWORK
<b>Comprehensive Eye Exam:</b> Once Every Plan Yea <b>r</b>	Covered after \$15 copay	Up to \$50
<b>Standard Lenses</b> Once Every Plan Year	Covered in full (Discounts available for premium progressive lenses.)	Single Vision up to \$40 Bifocal up to \$60 Trifocal up to \$80 Lenticular up to \$100
<b>Frames:</b> Once Every Two Plan Years	Up to \$150 retail (20% discount off remaining balance over \$150 allowance. Discount does not apply at Walmart/Sam's Club locations.)	Up to \$80
<b>Contact Lenses</b> Once every plan year, in lieu of lenses/frames Contact Lens Evaluation/Fitting covered in full (only covered if you choose contact lenses)	Up to \$120 Retail 15% discount (conventional) or 10% discount (disposable) off remaining balance over \$120. Discounts do not apply at Walmart/Sam's Club locations or Contact Fill mail orders.)	Up to \$120 Daily Wear \$20 Extended Wear \$30

#### VISION PLAN YEAR IS JULY 1-JUNE 30

VISIT www.udel.edu/faculty-staff/human-resources/total-rewards/health-and-life-insurance/vision/

# Long- and Short-Term **DISABILITY INSURANCE**

**THE UNIVERSITY PROVIDES FOR CONTINUING INCOME** in the event of disability to eligible employees. Visiting employee classifications are not eligible. There are two different insurance plans: (1) Long-Term Disability for Faculty and Exempt Staff; and (2) Short-Term and Long-Term Disability for State Employees' Pension participants.

#### LONG-TERM DISABILITY FOR FACULTY AND EXEMPT STAFF

If illness or injury results in disability that causes absence from work for more than six months, employees may apply for benefits through this program. A six-month waiting period is required before LTD Income benefits may begin.

**THERE IS NO COST TO THE EMPLOYEE FOR THE STANDARD OPTION.** Employees may choose the high option and pay the difference between the University's contribution for the standard option and the cost of the high option.

OPTION	BENEFIT AS A PERCENT OF SALARY*	MAXIMUM BENEFIT
Standard	60% of Covered Monthly Salary	\$10,000/month
High	66 2/3% of Covered Monthly Salary	\$15,000/month

<sup>5</sup> The percentage of salary is the most that can be received from all sources. This benefit will be reduced by Social Security and other employer-sponsored disability benefits.

#### SHORT-TERM DISABILITY FOR STATE EMPLOYEES' PENSION PLAN (SEPP)

Disability insurance pays a portion of your monthly earnings if you cannot work because of an illness or injury on or off the job. Eligible employees are automatically enrolled in the STD and LTD plans. Through employer contributions to the SEPP, the University covers the full cost for STD insurance.

SHORT-TERM DISABILITY INSURANCE PAYS A BENEFIT OF UP TO 75 PERCENT OF

**EARNINGS**, to a maximum of \$2,000 per week. Benefits begin on the 31st calendar day of disability and continue through the 182nd calendar day. Employees who expect to be out of work for at least 30 calendar days must file a STD claim with the disability insurance vendor no later than 15 calendar days from the employee's date of disability. Once the 30-day elimination period has been exhausted, the employee will be deemed to have applied for benefits and will not be eligible to use paid leave in lieu of application for STD. Report claims directly through the provider's toll-free number: 877-484-9731. For additional information visit <u>https://dhr.delaware.gov/benefits/disability/index.shtml.</u>



#### LONG-TERM DISABILITY FOR STATE EMPLOYEES' PENSION PLAN

Through employer contributions to the SEPP, the University covers the full standard option for non-exempt staff in the LTD insurance plan. Employees choosing the high option will pay the additional premium through pre-tax deductions from their University pay.

Long-Term Disability insurance pays a benefit of up to 60% of earnings, to a maximum of \$8,000 per month. Benefits start on the 183rd calendar day of disability and continue until the individual is no longer disabled or reaches age 65, whichever occurs first.

0	PTION	BENEFIT AS A PERCENT OF SALA	MAXIMUM BEN	IEFIT	
Sto	andard	60% of Covered Monthly Salary		\$8,000/month	
Hiç	gh	66 2/3% of Covered Monthly Salary		\$15,000/month	

\* The percentage of salary is the most that can be received from all sources, including offset or reduction by other employersponsored disability benefits, Social Security and similar governmental programs.

# LIFE INSURANCE

#### THE UNIVERSITY OFFERS GROUP TERM LIFE INSURANCE TO FULL-TIME

**EMPLOYEES.** Employees may choose one of three University-paid Basic Life options: \$10,000, \$50,000 OR two times base annual salary (maximum \$1,000,000).

**ENROLLMENT IN EMPLOYEE BASIC GROUP LIFE INSURANCE** is mandatory for fulltime employees. You may change your selection once a year during the Open Enrollment period.

**BASIC EMPLOYEE LIFE INSURANCE IS UNIVERSITY PAID;** the contribution for life insurance equals the elected level of coverage. The cost of any employer-provided group insurance in excess of \$50,000 is taxable imputed income. The IRS requires that the value of the premium for life insurance benefits, in excess of \$50,000 for tax purposes, be subject to taxation.

#### IF YOU ARE A FULL-TIME UNIVERSITY

**EMPLOYEE**, you are eligible to purchase additional Optional Life Insurance in addition to the Basic coverage provided. If you choose this option, you must elect Optional Life Insurance as a multiple of your annual base salary, and premiums are deducted from your pay on an after-tax basis. Enrollment in Optional Employee Life Insurance includes will preparation and estate resolution services at no additional cost. The premiums are age-graded, so as your salary and/or age increase, your premiums will also increase.

#### EMPLOYEES NOT PREVIOUSLY

**ENROLLED** in Optional Life Insurance will be required to provide a Statement of Health (SOH). A SOH is required if enrolling for Optional Life Insurance for the first time or whenever increasing Optional Life Insurance coverage outside of annual Open Enrollment.

#### CURRENT PARTICIPANTS IN OPTIONAL EMPLOYEE LIFE INS<mark>UR</mark>ANCE MAY

INCREASE COVERAGE one times to eight times annual base salary up to the plan maximum of \$1,250,000 by answering five medical questions. Current participants requesting an increase greater than one times annual base salary will be required to provide a SOH. Any election to reduce life insurance coverage (already in place) must be done in writing. Contact MetLife by calling 866-492-6983.

https://www.udel.edu/faculty-staff/human-resources/total-rewards/health-and-life-insurance/life/

## SAVING FOR RETIREMENT

#### RETIREMENT PLAN FEATURES & CONTRIBUTION LIMITS 403(B)

**Eligibility**: All employees, with the exception of student workers, are eligible to participate in the plan. Eligible faculty and staff will receive matching contributions.

#### **Contribution Limit:**

Visit <u>http://www.udel.</u> <u>edu/009471</u> under the Features tab, limitation section for current IRS limits.

#### Catch-up Contributions for participants age 50+: Visit http://www.udel.edu/009471 under the Features tab, limitation section for current IRS limits.

**Loans**: Available. Contact TIAA for details.

Hardship Withdrawal: Must meet IRS criteria.

#### 457(B)

Eligibility: Voluntary option for employees who wish to maximize their retirement savings beyond the 403(b). Allows employees to contribute additional pre-tax or post-tax contributions. Same investment options as 403(b).

**Contribution Limit**: Visit <u>www.udel.edu/009471</u> under the Features tab, limitation section for current IRS limits.

**Catch-up Contributions:** Visit <u>http://www.udel.edu/009471</u> under the Features tab, limitation section for current IRS limits.

Loans: Not Available

Hardship Withdrawal: Not Available

**Portability**: Participants in 403(b) and 457(b) plans can typically roll over eligible distributions from these plans into 401(k), 401(a), 403(b) and 457(b) plans and IRAs.

Service Credits: State Pension participants may transfer assets from their 403(b) or 457(b) plan to buy back amounts of refunded service credit.

#### STATE EMPLOYEES' PENSION PLAN

Eligible full-time hourly and most non-exempt staff employees participate in the State of Delaware Employees' Pension Plan immediately upon hire. It is mandatory by the State of Delaware to complete an Actuarial Form and submit it to Human Resources.

The University contributes a fixed percentage of total salary, adjusted each year by the State of Delaware. Pension plan participants are required to contribute to the State Employee Pension Plan per the following:

First Hired into a Pension Creditable Position Prior to 1/1/2012	3% after first \$6000 of earnings each year
First Hired into a Pension Creditable Position After 1/1/2012	5% after first \$6000 of earnings each year
Police Officers	7% of earnings

For vesting and other information, please visit <u>www.udel.edu/009472</u>. State Employees' Pension Plan participants can estimate their future pension income by using the pension calculator. To locate the calculator or if you have questions about your pension, please contact the State Office of Pensions at <u>www.delawarepensions.com</u> or call 800-722-7300.

If you are under the age of 65 when you retire, you must have a six-month bona fide separation from service before you can return to work with an employer participating in the State Employees' Pension Plan. If you are over the age of 65 when you retire, you may immediately return to work with an employer participating in the State Employees' Pension Plan provided that you also adhere to the Delaware Public Integrity Commission's requirements.

Learn more at <u>https://www.udel.edu/faculty-staff/human-resources/</u> total-rewards/retirement-information/sepp-retirement-income/

#### UNIVERSITY OF DELAWARE 403(B) RETIREMENT SAVINGS PLAN

Participation in the University of Delaware 403(b) Retirement Savings Plan is available to all faculty and staff, including individuals who work in variable hour or miscellaneous wage positions. The plan excludes student employees. The plan features a streamlined investment menu, pre-tax or Roth after-tax contribution options, and a TIAA Brokerage account option.

Enrollment in the 403(b) is not automatic. The effective start date is as soon as administratively possible, usually 1-2 pay periods after date of hire and enrollment. Through a secure login at <u>www.tiaa.org/</u><u>udel</u>, employees can enroll, make contribution elections, allocation changes, update beneficiaries and access retirement planning tools. Full-time faculty and exempt staff (not participating in the State Employees' Pension Plan) are eligible for University matching contributions. The University provides a matching contribution as a percentage of annual base salary for eligible faculty and staff who contribute to the program. Employees may contribute up to the IRS annual maximums.

MATCH RATE CHART			
If you contribute	The University contributes		
5%	11%		
4%	8%		
3%	6%		
2%	4%		
1%	2%		

TIAA can help you get started with online retirement planning tools, one-on-one virtual or on-campus meetings with a plan representative and customer service call centers. Schedule an appointment by calling 800-842-2252 or visiting <u>TIAA.org/udel</u>.

#### 457(B) DEFERRED COMPENSATION PLAN

The 457(b) deferred compensation plan is designed for full-time University employees who want to maximize their retirement savings in addition to the 403(b).

Participation in the 457(b) Deferred Compensation Plan does not require a minimum contribution. The University makes no contribution to the plan. Although there are no University contributions to the plan, the tax benefits of participating in a 457(b) Plan make it attractive for supplemental savings.

Through a secure login, employees can enroll, make contribution elections, allocation changes, update beneficiaries and access retirement planning tools. Visit the TIAA website for more information, <u>www.TIAA.org/udel</u>. The earliest a change or new withholding can be effective is the first of the month following the date of a newly signed agreement.

### **BENEFITS FOR UD RETIREES**

#### BENEFIT OPTIONS FOR RETIREES

HEALTH INSURANCE **TUITION REMISSION** COURSE FEE WAIVER **DEATH BENEFIT TUITION EXCHANGE** WELLNESS DOLLARS TRANSIT SERVICES LIFE INSURANCE LONG-TERM CARE **INSURANCE** DENTAL INSURANCE **VISION PROGRAM** PARKING PRIVILEGES UNIVERSITY ID CARD QUESTIONS? Email us at hrhelp@udel.edu.

**RETIREMENT PROGRAMS**. The 403(b) Retirement Savings Plan for faculty and staff, through TIAA and Fidelity Investments (legacy accounts), affords a variety of income options at retirement. Please refer to the 403(b) Retirement Plan Annual Contribution Limits for information about IRS limits that are applicable to the plan. There are various income options at retirement, including lifetime annuity income, fixed period annuities, deferred income, systematic withdrawals, lump sum withdrawals and interest-only payments. Oncampus one-on-one counseling sessions are regularly provided by retirement plan advisers. Contact TIAA (phone: 800-732-8353) and/or Fidelity Investments (legacy accounts) (phone: 800-642-7131) to schedule an appointment.

#### **INDIVIDUALS WHO MEET THE AGE AND SERVICE REQUIREMENTS FOR RETIREMENT** may participate in a rich array of benefits and privileges. **Effective January 1, 2024,** employees must meet Rule of 75 retirement criteria:

- Any age and 30 years of service
- Age and service when combined equal 75 (must be at least age 55 when combined with service; must have at least 10 benefits-eligible years of service when combined with age)

Learn more at https://www.udel.edu/faculty-staff/human-resources/current-retirees/

### **VOLUNTARY BENEFITS**

#### AUTOMOBILE AND HOMEOWNER

**INSURANCE** is offered by Liberty Mutual Insurance Company. Premiums are paid through payroll deduction. For additional information and to obtain insurance quotes, contact local sales agent Charmaine Jackson at 302-444-9107.

**PNC WORKPLACE BANKING** offers a complete set of money management tools with exclusive benefits and rewards, along with a Visa<sup>\*</sup> check card designed just for the University of Delaware. A PNC service center is located in the Trabant University Center near the Main Street entrance. For information, visit <u>WorkPlace Banking.</u>

#### THROUGH LONG-TERM CARE

**INSURANCE,** faculty and staff are provided options to help create a personalized plan that can make it easier to protect their savings and assets, their family and friends from the burden of caregiving and their ability to choose where care is received. To understand the benefits and features available to you under this program, visit <u>https://www.genworth.com/UDelaware</u> or call 800-416-3624. 529 COLLEGE SAVINGS PLAN is an education savings plan that permits families to set aside funds on a voluntary basis to meet future costs at qualified colleges and universities. Although contributions are not deductible on an individual's federal tax return, investments grow tax-deferred, and distributions to pay for the beneficiary's college costs are federally taxfree. Voluntary contributions to a 529 College Savings Plan can be deposited to an employee's saving plan(s) directly from his/her pay. Plans work much like a 403(b), 401(K) or IRA by investing contributions in mutual funds or similar investments. For information, refer to TIAA (www.tiaa.org) Fidelity Investments (http://personal.Fidelity.com) and/or Savings for College (<u>www.savingforcollege.com</u>).

SUPPLEMENTAL BENEFITS ARE DIFFERENT FROM MAJOR MEDICAL INSURANCE. Accident and Critical Illness Insurance provides lump sum cash payments if you or a covered dependent suffer an injury from an accident or are diagnosed with a condition covered under the policy. It is difficult to anticipate the extra expenses a serious accident or illness may bring, but with Securian Financial you can be prepared. <u>https://dhr.delaware.gov/</u> benefits/securian-acii/index.shtml



# FLEXIBLE SPENDING ACCOUNTS

#### **QUICK FACTS**

ASIFlex is the third-party administrator of the University's Flexible Spending Accounts (FSA) plan. ASIFlex has administered pre-tax programs exclusively since 1988 and has extensive experience in administering FSA programs for universities, colleges and other public entities, including the State of Delaware.

NOTE: FSA balances do not roll over from one year to the next. Any remaining balance from the prior plan year will be forfeited at the end of the grace period. Re-enrollment is required every year in order to continue plan participation.

NOTE: FSA reimbursements are not automatic. You must complete and submit claim forms to receive reimbursement. Claims may be submitted through April 30 for expenses incurred between Jan. 1 (or the actual period you were enrolled, if enrolled after Jan. 1) and the end of the grace period.

Contact ASIFlex with FSArelated questions by phone, 800-659-3035, or by fax, 877-879-9038.

#### RE-ENROLLMENT IN FSA IS REQUIRED EACH YEAR.

OPEN ENROLLMENT IS USUALLY IN NOVEMBER WITH BENEFITS BEGINNING JANUARY 1. **FSA's ARE VOLUNTARY ACCOUNTS** that help you pay for expenses not covered by the other benefit programs. You can participate in Health care expenses or Dependent (day) care expenses or both of the accounts.

UNDER FSA REGULATIONS, YOU MAY COVER more dependents than under the other health and dental plans. For the health care account, an eligible dependent can also include a dependent parent, as long as you provide more than one-half of the individual's support.

FOR THE DEPENDENT (DAY) CARE ACCOUNT, an eligible dependent includes your children (up to age 13), your spouse (only if he or she is disabled) and your parents or in-laws who depend on you and your spouse for more than one-half of their support and who spend at least eight hours a day in your home.

**CONTRIBUTING TO YOUR FSA.** When you're deciding how much to contribute to an FSA, you should estimate your expenses carefully. Once you contribute money to your FSA, you:

- Cannot transfer money from one account to another;
- Cannot withdraw money except to be reimbursed for a covered expense;
- Must use the money in the account only for expenses incurred during the period enrolled, up to and including the 2½-month grace period. If you do not spend all the money, you will forfeit any unused balance;
- Cannot change the amount you contribute during the year unless you have a change in family status and apply within 30 days of the qualifying life event.

#### THESE RESTRICT<mark>IO</mark>NS ARE REQUIRED BY FEDERAL

**LAW.** When you set up an account, you use before-tax payroll contributions to pay for your eligible expenses on a tax-free basis.

**CONTRIBUTION LIMITS** are subject to change yearly.

#### CONTRIBUTION LIMITS ARE AS FOLLOWS:

FSA	Minimum	Maximum	
Health Care	\$5.00/pay <mark>(</mark> \$120)	\$127.08/pay (\$3,050)*	
Dependent (Day) Care	\$5.00/pay (\$120)	\$208.33/pay (\$5,000)	
*Provision of the Patient Protection and Affordable Care Act			

WWW.UDEL.EDU/FACULTY-STAFF/HUMAN-RESOURCES/TOTAL-REWARDS/HEALTH-AND-LIFE-INSURANCE/FLEXIBLE-SPENDING/



## THERE'S AN APP FOR THAT

Do you have the app? Let us help you navigate your healthcare with ease, simply visit the App Store for Apple phone/devices or Google Play for Android phone/devices. Search for these names and icons, download and access your information anytime.



HighMark Plan Health insurance made easy

Amwell: HighMark Doctor Visits 24/7



Health & Fitness

Aetna



Teladoc: Aetna Doctor Visits 24/7



National Vision Administrators



CVS Caremark Convenient prescription refill



MetLife US App MetLife



ASIFlex Self Service ASIFlex



GuidanceNow Health and Well-Being Resource



**TIAA** Finance

# **EDUCATION BENEFITS**

**THE UNIVERSITY OFFERS A VARIETY OF EMPLOYEE EDUCATION** assistance programs to full-time University employees. Some of the education benefit programs are available to the employee's eligible dependents.

ELIGIBLE EMPLOYEES INCLUDE FULL-TIME EMPLOYEES on the active payroll at the end of the late registration period (Free Drop/Add) for the semester in which the tuition remission is granted.

THE COURSE FEE WAIVER benefit is for the employee's part-time study at the University of Delaware, but may be transferred to the employee's eligible spouse and/or dependents.

THE TUITION REMISSION PROGRAM is available to eligible employees for their spouse and/or dependent child.

A SPOUSE MUST BE in a legally recognized marriage or civil union recognized under Delaware law to the employee before the end of the late registration period in which the education benefit is granted.

A DEPENDENT CHILD IS DEFINED as a biological child or a legally adopted child of the employee or spouse (under age 26), who will be claimed by the employee as an exemption for federal income tax return for the year in which the benefit is granted.

TUITION EXCHANGE IS AVAILABLE TO eligible dependent children of full-time employees with at least two or more years of eligible University service as of Oct. 31 of the year in which the TE application is submitted.

COOPERATIVE TUITION EXCHANGE is available to full-time employees only.

WWW.UDEL.EDU/FACULTY-STAFF/HUMAN-RESOURCES/TOTAL-REWARDS/TUITION-BENEFITS/



### TALENT AND ORGANIZATIONAL DEVELOPMENT

As University of Delaware employees, we all have different goals and aspirations for our careers. Some of us want to become managers and develop leadership skills while others want to create new things and continue to strengthen talents.

When we continue to work towards our professional development goals, we can improve our confidence while feeling more engaged in the workplace.

The Human Resources Talent and Organizational Development (TOD) team provides support to individuals, teams, units, and colleges to build their capabilities and achieve greater effectiveness. We do this with a variety of initiatives focused on learning, leading and organizational change processes.

We offer high-impact, tailor-made, and scalable approaches using effective methodology for interventions.

Here is a synopsis of the programs we deliver and the services we provide:



Learning and	Organizational	Performance	Wellbeing and
Development	Development	Management	Engagement
Certificate of	Assessment and	Goal Setting	Hen High Fives and Staff
Excellence Programs	Discovery		Excellence Awards
Learning for Teams	Strategy Development	Coaching and Feedback	Milestone Rewards
Learning Campaigns	Meeting / Retreat	Performance	Annual Wellbeing
	Facilitation	Assessment	Challenges
Leadership Programs	Formal Tools		Mental Health First Aid Training

Our team provides consulting to assist campus leaders and teams to assess current strategies, successes and challenges. We provide formal recommendations for support, which may include coaching, customized training, organizational change planning and/or referrals to other resources.

To learn more or to set up an intake meeting, email <u>talent-dev@udel.edu</u>.

#### WWW.UDEL.EDU/FACULTY-STAFF/HUMAN-RESOURCES/LEARN-AND-GROW/

# FREQUENTLY USED CONTACTS

	PHONE	WEB
UD Human Resources	302-831-2171	www.udel.edu/hr
FlexNet (Open Enrollment)		www.udel.edu/flexnet
Self Service Views		https://www.udel.edu/webviews
Web Forms		https://www.udel.edu/webforms
Aetna	877-542-3862	www.aetna.com/
ASIFlex (FSA/Transit)	800-659-3035	www.asiflex.com
ASI COBRA	877-388-8331	www.asicobra.com
Delaware Office of Statewide Benefits	800-489-8933	https://dhr.delaware.gov/benefits/
CVS Caremark	833-458-0835	www.caremark.com/
Fidelity Investments	800-343-0860	www.mysavingsatwork.com
Hartford (State Disability)	888-277-4767	dhr.delaware.gov/benefits/disability/index.shtm
Highmark Delaware	844-459-6452	www.highmarkbcbsde.com
ComPsych® GuidanceResources® Organization: State of Delaware	877-527-4742	guidanceresources.com
Liberty Mutual Insurance (Auto/Home)	800-865-2405	www.libertymutual.com
MetLife (Dental)	800-942-0854	www.metlife.com/mybenefits
MetLife Grief Counseling Username: metlifeassist; Password: support	855-609-9989	https://metlifegc.lifeworks.com/
MetLife (Life Insurance)	866-492-6983	www.metlife.com/mybenefits
MetLife (LTD)	800-300-4296	www.metlife.com/mybenefits
NVA (National Vision Administrators)	800-672-7723	www.e-nva.com
PNC WorkPlace Banking	302-429-1344	WorkPlace Banking
Securian	800-328-9442	dhr.delaware.gov/benefits/securian-acii/index.shtml
Service & Retirement Awards Program (MTM Recognition)	800-898-5945	www.mtmrecognition/
State Pension Office	800-722-7300	www.delawarepensions.com
TIAA	800-842-2776	www.tiaa.org/udel

UD Retiree Health Contacts:			
SilverScript (Medicare)	844-757-0448	dhr.delaware.gov/benefits/cvs/medicare/index.shtml	
Delta Dental	800-873-4165	https://www1.deltadentalins.com/	
Dominion Dental	888-518-5338	www.dominionnational.com	
Highmark Special Medicfill	844-459-6452	www.highmarkbcbsde.com	

