2023-2024 Benefits Guide



WE BUILD INSTITUTIONAL CAPABILITY AND INSPIRE EXCELLENCE FOR LASTING IMPACT.



UDEL.EDU/HR

A MESSAGE FROM

Melissa L. Bard Vice President and Chief Human Resources Officer



Dear Colleague,

Welcome to the University of Delaware's 2023-2024 Employee Benefits Guide, designed to help you make informed decisions about benefit options for you and your family.

Your hard work, dedication and many contributions ensure that this institution continues to thrive and to provide topranked educational opportunities, ground-breaking research initiatives and community-changing service programs.

Be assured that the health and wellbeing of our employees will always be a top priority for the University, and we are pleased to provide you with an array of benefit offerings encompassing everything from health and wellness to life insurance to retirement planning.

Please use this guide to learn about the many options available to you during the **open enrollment** period from **May 1 to May 17**. Additional information is available at our Working at UD website, and Human Resources staff may be reached at hrhelp@udel.edu.

Sincerely,

Melisse L Bard



A LOOK INSIDE

What's New	5
Enrollment Options at a Glance	7
Benefits Overview	8
Enrollment Instructions for New Hires and Newly Benefited Employees	9-10
Benefit Rates	11
Comparison Charts	12-15
How to View Your Paystub	16
Health Insurance	17
Prescription Drug Plan	18
Spousal Coordination of Benefits	19
Dependent Coordination of Benefits	19
Dental Insurance	20
Vision Insurance	21
Disability Insurance	22
Life Insurance	23
Saving for Retirement	24-25
Benefits for UD Retirees	26
Service and Recognition	26
Voluntary Benefits	26
Supplemental Benefits	26
Automobile and Homeowner Insurance	26
PNC Banking Services	26
Long-Term Care Insurance	26
529 College Savings Plan	26
Flexible Spending Accounts (FSA)	27
There's an APP for That	28
Educational Benefits	29
Talent and Organizational Development	29
Frequently Used Contacts	Back Cover

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.

2023-2024 Benefits

WHAT'S NEW

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, 2023, 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 \$2.98 to \$29.27 per month. The increase in rates is to ensure there are sufficient funds to cover the continued increases in healthcare costs.

DENTAL PREMIUMS for benefit-eligible employees and their eligible dependents will continue to be at no cost to the employees. The University of Delaware will absorb the cost increase for this benefit.

PRESCRIPTION COPAYS will increase for all non-specialty medications. For additional information, please visit page 18 in this guide.

WEIGHT LOSS MEDICATIONS will be covered under the pharmacy benefits through CVS Caremark. The coverage of these medications will come with utilization management, and members will be required to work with CVS Caremark and their medical provider to obtain coverage under the plan.

CVS PRUDENTRX PROGRAM allows enrolled members to obtain specialty medications on the CVS Preferred Specialty Drug List at \$0 out-of-pocket. This includes medications for rheumatoid arthritis, multiple sclerosis, and cancer.

ALL BARIATRIC (WEIGHT LOSS) surgeries will be required to be completed through the Surgery Plus benefit and performed by a surgeon in the Surgery Plus network. Surgeons and facilities must meet strict Surgery Plus credentialing guidelines, leading to the highest quality care possible. With Surgery Plus, members have no out-of-pocket costs, higher quality outcomes, and concierge service with a Care Advocate.

THE OPTIONAL LIFE INSURANCE program through MetLife will now include plan coverage up to 8 times your Annual Base Pay, and up to a maximum of \$1,250,000 (proof of good health may be required).

FLEX CREDIT for life insurance will now be equal to the elected level of coverage.

HIGHMARK COMPREHENSIVE PPO PLAN AND AETNA HMO PLAN member copays will increase at in-network hospital-affiliated facilities to \$150 per visit for outpatient surgery (currently \$100 per visit) and \$100 per visit for outpatient high-tech imaging (currently \$75 per visit). To learn more about health plan coverage, visit choosing the right care at https://dhr.delaware.gov/benefits/right-care/index.shtml.



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®. You also have access to the website at www.guidanceresources.com (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. dhr.delaware.gov/benefits/msp

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. dhr.delaware.gov/benefits/surgery-plus

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 https://www.udel.edu/faculty-staff/human-resources/benefits/recognition-work-life-programs/



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 www.udel.edu/flexnet.

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 hrhelp@udel.edu.

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.

QUALIFYING LIFE EVENT DOCUMENT GUIDE

CHANGE IN MARITAL STATUS Marriage

- → Marriage/Civil Union Certificate
- → State of Delaware's Spousal Coordination form
- → Certificate of Tax Dependent Status
- → 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 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)

All documents should be submitted to: HR-Benefits, First Floor-Suite 150, 413 Academy St., Newark, DE 19716. You may also submit your documents by using our Secure Document Submission Form on the Forms website.







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 health plans is available at http://www.udel.edu/Benefits.

HOW TO VIEW YOUR BENEFITS. The online Flex Benefits View, at www.udel.edu/webviews, 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: UDEL.EDU/BENEFITS UNIVERSITY **EMPLOYEE EMPLOYEE** SHARE OF SHARE OF SHARE OF SHARE OF HEALTH DENTAL HEALTH VISION **INSURANCE INSURANCE INSURANCE INSURANCE**

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

New hires and newly benefited **EMPLOYEES**

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 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.

BENEFIT PLAN AND ENROLLMENT OPTIONS AT A GLANCE

COVERAGE	PLAN OPTIONS	COVERAGE TIERS
Health Insurance ¹	Highmark Delaware First State Basic PPO, 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 ²
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)
2.10 1.10 1.10 1	Optional Employee Life Insurance ³	Voluntary Enrollment through MetLife
	Dependent Life Insurance ³	Voluntary Enrollment through MetLife
Flexible Spending	FSA Health Care	Voluntary Enrollment upon hire
Accounts	FSA Dependent (Day) Care	Waive

¹All health plans include prescription coverage through CVS Caremark

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

³ 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 PPO

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

	Total Per Pay Rate	UD Pays	Employee Pays
Highmark Delaware First State Basic			
Employee	\$434.01	\$416.65	\$17.36
Employee & Spouse	\$897.95	\$862.03	\$35.92
Employee & Child(ren)	\$659.74	\$633.35	\$26.39
Family	\$1,122.48	\$1,077.58	\$44.90
Aetna CDH Gold			
Employee	\$449.19	\$426.73	\$22.46
Employee & Spouse	\$931.37	\$884.80	\$46.57
Employee & Child(ren)	\$686.29	\$651.98	\$34.31
Family	\$1,183.23	\$1,124.07	\$59.16
Aetna HMO			
Employee	\$453.10	\$423.65	\$29.45
Employee & Spouse	\$955.31	\$893.95	\$62.09
Employee & Child(ren)	\$693.13	\$648.08	\$45.05
Family	\$1,192.02	\$1,114.54	\$77.48
Highmark Delaware Comprehensive PPO			
Employee	\$495.49	\$429.84	\$65.65
Employee & Spouse	\$1,028.18	\$891.95	\$136.23
Employee & Child(ren)	\$763.63	\$662.45	\$101.18
Family	\$1,285.37	\$1,115.06	\$170.31
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 http://www.udel.edu/faculty-staff/human-resources/benefits/rates/

HEALTH PLAN COMPARISON CHART

EFFECTIVE July 1, 2023

	LALITI FLAN OUNFAN						LITEOTIVE	uig i, Loco	
Plan Type	Highmark Delawa	re First State Basic	Aetna	Aetna CDH Gold		Aetna HM	0	Highmark Delaware	Comprehensive PPO
Plan Options	Preferred Provider	Preferred Provider Organization (PPO)		Preferred Provider Organization (PPO)		Health Maintenance Organization (HMO)		Preferred Provider C	Organization (PPO)
Primary Care Provider (PCP) Selection	Recom	mended	Recon	Recommended Required Recommended		ended			
Plan Feature	In-Network	Out-of-Network	In-Network	Out-of-Network		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		100% covered	Not covered	100% covered	20% covered 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		N/A	N/A	N/A	\$300 per individual/ \$600 per family
Health Reimbursement Account (HRA)	N/A	N/A	\$1,250 per individual/ \$2,500 family	\$1,250 per individual/ \$2,500 family		N/A	N/A	N/A	N/A
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		\$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
Prenatal and Postnatal Care	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible		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
24/7 Nurse Line	Yes, r	Yes, no cost		no cost		Yes, no cos	t	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		\$15 copay per visit	Not covered	\$20 copay per visit	20% coinsurance after deductible
Telemedicine (Virtual Doctor Visits)	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible		\$0 copay per visit	Not covered	\$0 copay per visit	20% coinsurance after deductible
Urgent Care Visit	100% covered after \$25 copay	100% covered after \$25 copay	10% coinsuranceafter deductible	30% coinsurance after deductible		\$15 copay per visit	Not covered	\$20 copay per visit	20% coinsurance after deductible
Emergency Room	10% coinsurance after deductible	10% coinsurance after deductible	10% coinsurance after deductible	10% 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)
Chiropractic Care (Requires medical necessity and excludes preventive/ maintenance care) Note: No visit maximum for treatment of back pain	10% coinsurance after deductible for up to 30 visits per plan year	30% 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		Lesser of \$15 copay or 20% coinsurance (Referrals required through PCP)	Not covered	15% coinsurance for up to 30 visits per plan year	30% coinsurance after deductible for up to 30 visits per plan year
Physical 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	30% coinsurance after deductible		20% coinsurance for up to 45 visits per illness/injury (Referrals required through PCP)	Not covered	15% coinsurance	20% coinsurance after deductible
Specialist Visit (In-person or virtual)	10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible		\$25 copay per visit (Referrals required for certain services through PCP)	Not covered	\$30 copay per visit	20% 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		LabCorp and Quest Diagnostics (Preferred): \$10 copay per visit Hospital/Other Lab Facility: \$50 copay per visit	Not covered	In-Network Non-Hospital Affiliated Preferred Lab: \$10 copay per visit Hospital/Other Lab Facility: \$50 copay per visit	20% coinsurance after deductible
Basic Imaging/X-Ray/ 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) Hospital Affiliated Facility: \$50 copay per visit (Referrals required through PCP)	Not covered	Non-Hospital Affiliated Freestanding Facility Preferred: \$0 copay per visit Hospital Affiliated Facility: \$50 copay per visit	20% coinsurance after deductible

HEALTH PLAN COMPARISON CHART

EFFECTIVE JULY 1, 2023

Plan O	ptions	Highmark Delawa	re First State Basic Plan	Aetna CDH	Gold Plan		Aetna l	HMO Plan	Highmark Delaware C	Comprehensive PPO Plan
		In-Network	Out-of-Network	In-Network	Out-of-Network		In-Network	Out-of-Network	In-Network	Out-of-Network
		10% coinsurance after deductible	30% coinsurance after deductible	10% coinsurance after deductible	30% coinsurance after deductible	F	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
requires a pric	or damonzanom						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 I	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
(hip replace	ppedic 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 laminectomy, aminectomy/	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* Preferred: \$100 copay per day; \$200 copay max per admission	20% covered after deductible
Note: Requ	uires a prior rization						Non-COE Facility: \$500 copay per admission		Non-COE Facility: \$500 copay per admission	
Note: Requ	atric uires a prior rization	Not covered under Highmark Required through SurgeryPlus benefit	Not covered under Highmark Required through SurgeryPlus benefit	Not covered under Aetna Required through SurgeryPlus benefit	Not covered under Aetna Required through SurgeryPlus benefit		Not covered under Aetna Required through SurgeryPlus benefit	Not covered under Aetna Required through SurgeryPlus benefit	Not covered under Highmark Required through SurgeryPlus benefit	Not covered under Highmark Required through SurgeryPlus benefit
(For Highmar not apply to bone marro	llants** "k plans, does o kidney and ow/stem cell)	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
Note: Requ author	ires 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	

^{**}Members are encouraged to review the Highmark or Aetna plan documents for details regarding coverage.

For more information, including plan documents and listings of eligible Urgent Care Centers, COE Facilities and Non-Hospital Affiliated Freestanding Locations for Lab Work and Imaging/Radiology Services, visit the Statewide Benefits Office (SBO) website at de.gov/statewidebenefits.

For more information, including plan documents and listings of eligible Urgent Care Centers, COE Facilities and Non-Hospital Affiliated Freestanding Locations for Lab Work and Imaging/Radiology Services, visit dhr.delaware.gov/benefits/.

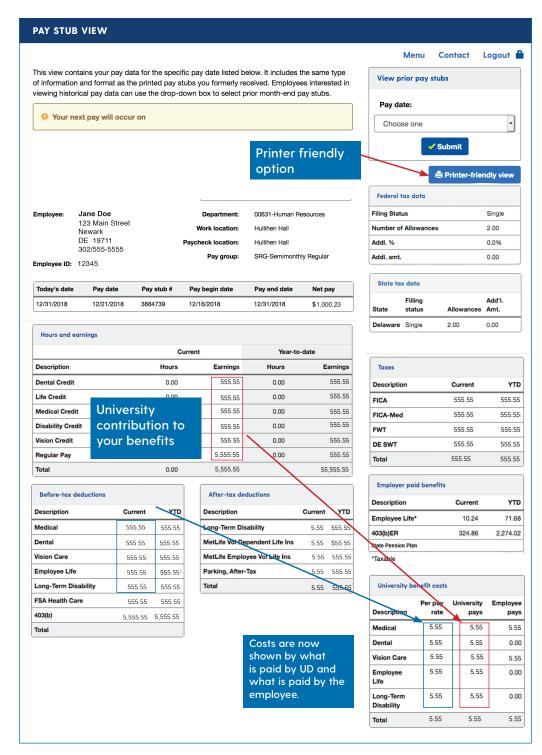
2023-2024 Benefits Guide 15

^{**}Members are encouraged to review the Highmark or Aetna plan documents for details regarding coverage.

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.



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

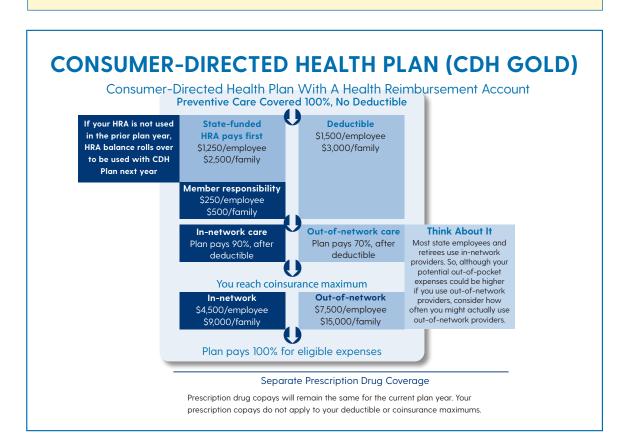
- Requires HMO primary care physician
- Large national directory of innetwork providers
- Requires referrals for specialists
- No coverage for out-of-network doctors or services
- No deductibles, only copays

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



17

CVS Caremark Scripts 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 https://www.caremark.com/.
- 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. Additional information on this program, a list of 90-day participating pharmacies, and information on CVS Caremark Home Delivery may be obtained at https://dhr.delaware.gov/benefits/cvs/index.shtml

PRESCRIPTION DRUG COPAY STRUCTURE

	Generic ¹	Preferred Brand ²	Non-Preferred Brand ³
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...

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.

TIAA

TIAA offers a variety of resources to help you plan for your future. By visiting www.tiaa.org/udel, 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 http://www.udel.edu/009528.

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, Metlifeac.lifeworks.com

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

¹ Tier one covers generic products

² Tier two covers preferred brand name (formulary) drugs

³ Tier three covers non-preferred brand (non-formulary) drugs.

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.shtml

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):

http://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.





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 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/benefits/health-benefits/dental/

DID YOU KNOW?

Flexible Spending Accounts-ASI Flex

FSA Store FSA Store is stocked with thousands of FSA-eligible products. And since 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 asiflex.com and click on the FSA Store icon or click on the following link: FSA Store.

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. https://www.guidanceresources.com/

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 co-pay amount(s). Please enter Group/Sponsor Number 51942000001 to search for NVA providers.

NVA SMART BUYERSM: 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 www.e-nya.com.

SUMMARY OF VISION BENEFITS

PLAN YEAR IS JULY 1-JUNE 30

SERVICE	BENEFITS IN-NETWORK	BENEFIT OUT-OF-NETWORK
Comprehensive Eye Exam: Once Every Plan Year	Covered after \$15 co-pay	Up to \$50
Standard Lenses 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
Frames: 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
Contact Lenses 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

VISIT https://www.udel.edu/faculty-staff/ human-resources/benefits/health-benefits/vision/

21

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

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: 866-945-7781. For additional information visit https://dhr.delaware.gov/benefits/groups/index.shtml



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.

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

^{*} The percentage of salary is the most that can be received from all sources, including offset or reduction by other employer-sponsored 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 full-time 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 INSURANCE 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 an SOH. Any election to reduce life insurance coverage (already in place) must be done in writing. Contact hrhelp@udel.edu for details or contact MetLife by calling 866-492-6983.



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 http://www.udel.edu/009471 under limitation section for current IRS limits.

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

Catch-up Contributions: Visit http://www.udel.edu/009471 under 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 www.udel.edu/009472. 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 www.delawarepensions.com 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 https://www.udel.edu/faculty-staff/human-resources/benefits/retiree-benefits/non-exempt-retiree-benefits/

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 www.tiaa.org/udel, 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 TIAA.org/udel.

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25

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, www.TIAA.org/udel. 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 July 1, 2022, employees must meet Rule of 80.

benefits and privileges. Effective July 1, 2022, employees must meet Rule of 80 retirement criteria:

- Any age and 30 years of service
- Age and service when combined equal 80 (must be at least age 55 when combined with service; must have at least 15 benefits-eligible years of service when combined with age)

Learn more at https://www.udel.edu/faculty-staff/human-resources/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, 302-444-9107.

PNC WORKPLACE BANKING offers a complete set of money management tools with exclusive benefits and rewards, along with a Visa® 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 WorkPlace Banking.

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 go to www.genworth.com/groupltc (Group ID UDelaware and Access code groupltc) 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 come out federally tax-free. 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 (www.savingforcollege.com).

SUPPLEMENTAL BENEFITS ARE DIFFERENT FROM MAJOR MEDICAL

INSURANCE. Accident and Critical Illness Insurance provide 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.

SERVICE AND RECOGNITION

OUR SERVICE AND RECOGNITION PROGRAMS ARE DESIGNED TO CREATE A FLEXIBLE environment that supports employee success at work and at home. Employee resources, recognition, events and services are just a few of the ways we help make UD a great place to work.

WE OFFER THE FOLLOWING:

- · RECOGNITION SERVICES
- · FINANCIAL PROGRAMS
- · HOUSING
- UD RESOURCES

- DEPENDENT CARE RESOURCES
- UNIVERSITY OF DELAWARE ATTRACTIONS
- · EMPLOYEE DISCOUNTS

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 FSA-related 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 JAN. 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 (but only under age 13), your spouse (but 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 RESTRICTIONS 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 (\$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 C	are Act			

LEARN MORE AT https://www.udel.edu/faculty-staff/human-resources/benefits/health-benefits/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 androids 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



Aetna Health & Fitness



Teladoc: Aetna Doctor Visits 24/7



National Vision Administrators 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 the 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.

LEARN MORE AT UDEL.EDU/BENEFITS

TALENT AND ORGANIZATIONAL DEVELOPM

The employee experience represents the journey an employee takes with our organization. It includes every interaction that happens along the employee life cycle, plus the experiences that involve an employee's role, workspace, manager and overall wellbeing.

We work to build personal, professional and organizational capabilities. Here are some examples:

ENGAGEMENT AND WELLBEING

- Recognition-Hen High Five
- Walktober

LEARNING AND DEVELOPMENT

- Certificates of Excellence
- Online learning resources
 - LinkedIn Learning, Academic Impressions
- Organizational Development
- Gallup Strengths assessment and Q12 engagement survey
- Strategic planning facilitation

NEW!!

- Mental health support and training
- Crucial Conversations for teams
- LinkedIn Learning campaigns

To learn more visit <u>Talent & Organizational Development</u>

To request a customized program email talent-dev@udel.edu







	PHONE	WEB
UD Human Resources	302-831-2171	www.udel.edu/workingatud
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)	800-538-8439	
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	https://dhr.delaware.gov/benefits/life/groups.shtml
Service & Retirement Awards Program (MTM Recognition)	800-898-5945	www.udel.edu/hr/serviceandrecognition
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	www.silverscript.com	
Delta Dental	800-873-4165	https://www1.deltadentalins.com/	
Dominion Dental	888-518-5338	www.dominionnational.com	
Special Medicfill	844-459-6452	www.highmarkbcbsde.com	

