Annual Open Enrollment Guide 2024

Division of Finance and Operations
Human Resources
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**Important Reminder:**
Action is **required** if you want to participate in a Healthcare Flexible Spending Account, Dependent Care Flexible Spending Account, or Healthcare Savings Account for the 2024 plan year.
WELCOME

The Annual Open Enrollment Guide is designed to help you make an informed decision about your employee benefits.

www.hr.ua.edu/benefits/openenrollment

INTRODUCTION

Open Enrollment begins Sunday, Oct. 15 and ends Tuesday, Oct. 31 at 11:59 p.m. CDT. This is your annual opportunity to make changes to your benefits! All changes are effective Jan. 1, 2024.

There are two critical points to remember:

1 ACTION IS REQUIRED

An affirmative election is required if you want to participate in a Healthcare Flexible Spending Account, Dependent Care Flexible Spending Account or a Health Savings Account for the 2024 plan year. Your current election will not rollover. If you want to participate in these benefits, you must elect a contribution amount. If you fail to elect a new contribution amount, you must wait until the next open enrollment period to elect coverage unless a qualifying life event occurs.

2 NO ACTION IS REQUIRED

No action is needed if you are satisfied with your medical, dental or vision coverages and do not want to make any changes. These current benefit coverages will rollover effective Jan. 1, 2024 without you taking any action.

AT A GLANCE

WHEN TO ENROLL
- October 15 - 31, 2023
- 408 hours over 17 days

WHERE TO ENROLL
- Benefitfocus Online Dashboard
- BenefitPlace Mobile App

CONTACT US

The HR Service Center is open Monday thru Friday from 8:00 am to 5:00 pm. Call (205) 348-7732 or email hr@ua.edu for assistance.
What's New?
The following is a summary list of enrollment highlights effective Jan. 1, 2024.

OPEN ENROLLMENT HIGHLIGHTS

NO PREMIUM INCREASES FOR MEDICAL, DENTAL, or VISION PLANS

Good news! UA will not increase medical, dental or vision premium rates next year, so you will pay the same premiums for all medical, dental and vision plans with the same coverage tiers in 2024.

FIRST-DOLLAR DEDUCTIBLE INCREASE

For HDHP participants only, the calendar year first-dollar deductible will increase from $1,500 to $1,600 for employee only coverage, and the deductible will increase from $3,000 to $3,200 per family. HSA seed money will also increase to $500 per employee contract and $1,000 per family contract. No changes to the deductible for the PPO plan.

HEALTHCARE FLEXIBLE SPENDING ACCOUNT ANNUAL CONTRIBUTION LIMIT INCREASE

For employees enrolled in the PPO medical plan or no medical plan, the annual contribution limit for your Healthcare FSA will increase by $200 from $2,850 to $3,050. Remember, action is required to elect a new contribution amount if you want to participate in the FSA for next year!

NEW PROGRAM! HINGE HEALTH

A digital physical therapy tool for employees and dependents with joint and muscle pain. Features include mobile app, computer-vision and wearable sensors, plus dedicated clinical care team. Hinge Health is available at no cost to employees, but enrollment in a UA medical plan is required to apply. Initial referral from a local provider is required.

GOOD NEWS! You can now download the new Benefitplace mobile app. Simply enter Company ID: UA-Benefitfocus and login with your myBama username and password.

Contact Us! The HR Service Center is open Monday thru Friday from 8:00 am to 5:00 pm.

(205) 348-7732 hr@ua.edu 1515 Flint River Drive
Follow these simple steps to complete open enrollment. You will view a green confirmation screen and receive a confirmation email at the end.

1. Login to MyBama
2. Navigate to Employee Page
3. Select logo for Benefitfocus
4. Select Open Enrollment button
5. Select Get Started! link
6. Complete Enrollment

We've simplified the enrollment process

You can download the new Benefitplace mobile app! Simply enter Company ID: UA-Benefitfocus and login with your myBama username and password. Duo two-factor authentication will be required.
Employee eligibility is determined by classification and full-time equivalency (FTE) status. Refer to the Benefits Eligibility Matrix on the HR website for additional details.

ELIGIBLE DEPENDENTS & DOCUMENTATION
Dependent documentation is required to add NEW dependents during Open Enrollment.

**SPouse**
An individual lawfully married to another individual.

Documentation to verify spousal status includes:
- Copy of your government-issued marriage certificate, OR
- Copy of tax return transcript of your most recently filed federal income tax return (copy of Form 1040 tax return or e-file documentation is not sufficient)

**Child**
Child (up to age 26) of employee or employee’s lawful spouse includes:
- Natural, biological child,
- Step child who is the employee’s legal dependent,
- Legally adopted child, OR
- Any child who is placed with the employee by an authorized agency or by judgment, decree, or other court order for adoption or foster care

Documentation to verify status is birth certificate or court order.

**Incapacitated Adult**
Dependent child who is:
- Age 26 or older,
- Unmarried,
- Permanently and totally disabled before age 26, AND
- Not able to support their self and dependent on UA employee for support due to this incapacity

Same documentation requirement as child, however, certain carriers may need additional information to continue benefits after age 26. Contact the Benefits Office for assistance prior to 26th birthday.

LIFE EVENT EXAMPLES

- **New Spouse**: Requires marriage certificate or most recent tax return transcript
- **New Child**: Requires birth certificate or court order for adoption or foster care placement
- **Loss of Coverage**: Requires proof of coverage cancellation from prior employer or prior insurance carrier

WHAT IS THE DEADLINE?
Changes to your benefits can only be made during annual Open Enrollment each October OR within 30 days of a qualifying life event (QLE).

Documentation related to your QLE must be uploaded to Benefitfocus or faxed to the HR Service Center. Failure to request changes and provide documentation within this 30-day time frame may result in waiting until the next annual open enrollment period to change current coverage(s).

(205) 348-7732  hr@ua.edu  1515 Flint River Drive
HELPING YOU UNDERSTAND YOUR INSURANCE COVERAGE

Do You Know Your ....

DEDUCTIBLE
Your calendar year first-dollar deductible is the amount of money that you, as a plan member, pay out-of-pocket each year for covered healthcare expenses before UA begins to pay toward the cost of your care. This deductible excludes certain free preventive services that are automatically covered at 100% by UA’s plan. The PPO deductible is lower; HDHP is higher.

OUT-OF-POCKET MAXIMUM
It is the most you will be responsible for paying out-of-your-pocket for the calendar year, such as in a worse-case scenario or emergency situation. This includes money paid toward your deductible, copayments, or coinsurance. Your premium and any out-of-network costs are not included. After you reach this limit, UA pays 100% of healthcare claims for covered services the rest of the year.

COPAYMENT
A copayment or copay is a fixed dollar amount for a covered service or product that you will pay to the provider before receiving the service or product. Copayments apply after the deductible, and are defined per service type in your plan policy documents to be paid each time a particular service or product is accessed. Copayments only apply to the PPO medical plan.

COINSURANCE
Coinsurance is the amount you pay for a covered service or product after you meet your first-dollar deductible. This amount is a percentage of the total cost of care—for example, 20% of a $100 office visit claim is a $20 coinsurance—and your plan covers the remaining amount. Coinsurance most commonly applies to the HDHP medical plan where you pay 20% and UA pays 80%.

Here is the reason why IT MATTERS

Understanding the basics about your medical insurance costs will help you become a smarter consumer.

hr.ua.edu/benefits/openenrollment  hr@ua.edu  (205) 348-7732
MEDICAL PLANS

1. PREFERRED PROVIDER ORGANIZATION (PPO) PLAN
2. HIGH DEDUCTIBLE HEALTH PLAN (HDHP)

ABOUT PPO

HIGHER PREMIUM
A premium is the set rate you pay for your medical insurance that is deducted pre-tax from your paycheck(s) each month. The PPO plan has higher premiums than the HDHP, meaning you pay more upfront before using the plan for covered medical or pharmacy services.

LOWER DEDUCTIBLE
The calendar year first-dollar deductible is lower under the PPO ($400 per person). You will pay this deductible out-of-pocket each year before the plan begins to pay toward the cost of your healthcare claims. A lower deductible means the plan will likely start to pay earlier in the year when compared to the HDHP. After your deductible is met, you will be responsible for copayments.

ABOUT HDHP

LOWER PREMIUM
The HDHP has lower premiums than the PPO plan, meaning you have less deducted pre-tax from your paycheck(s) every month. Spending less up front tends to appeal to generally healthy members who don’t anticipate many upcoming medical expenses.

HIGHER DEDUCTIBLE
The trade-off for spending less on your monthly premium is that you’re responsible for 100% of out-of-pocket costs until the deductible is met. The calendar year first-dollar deductible is higher under the HDHP ($1,600 or $3,200 per contract). A higher deductible means the plan will likely start to pay later in the year (or may not pay at all depending on your individual healthcare claims). After your deductible is met, you will pay coinsurance.

THE PPO AND HDHP MEDICAL PLANS OFFER THE SAME:

PROVIDER NETWORK
A provider network is a list of in-network doctors, other healthcare providers, pharmacies and facilities that your plan contracts with to provide discounted medical care to you and your dependents.

COVERED SERVICES
If a service is covered, it means the insurer (Blue Cross and Blue Shield of Alabama) has agreed to pay for some or all of the cost of eligible, covered benefits under your medical plan.

PREVENTIVE CARE
Most medical plans are required to cover a set of preventive services — like annual check-ups, vaccines and screening tests — at no cost to you. Preventive care is excluded from your first-dollar deductible. It’s free!

(205) 348-7732
hr@ua.edu
1515 Flint River Drive
WHICH MEDICAL PLAN IS RIGHT FOR ME

The PPO may appeal to those who:

- Are 65 or over
- Are planning on becoming pregnant and seeing their doctor regularly in the coming year
- Anticipate needing more prescriptions or frequent care due to a pre-existing or chronic medical condition
- Have multiple dependents on their plan
- Have scheduled or anticipate upcoming expenses (such as a planned procedure or surgery)

The HDHP may appeal to those who:

- Are young and generally healthy
- Are not planning on becoming pregnant
- Rarely visit the doctor or buy prescription drugs
- Don’t have dependents on their plan
- Can cover higher out-of-pocket costs in an unexpected or emergency medical situation

Important Reminder

The Benefits Office cannot recommend a plan choice because there’s no “right” plan — it depends on your individual situation. How much coverage do you think you or your family will need in the coming year? Can you afford the deductible or out-of-pocket maximum for each plan? Once you have an idea of numbers, sit down and do the math to determine which plan makes financial sense for you and your family.

Contact Benefits to discuss plan details!

📞 (205) 348-7732
✉️ hr@ua.edu
🌐 hr.ua.edu/benefits/openenrollment
We’re excited to announce Hinge Health, a digital physical therapy tool for employees and their dependents with musculoskeletal conditions (MSK) like joint and muscle pain. The Hinge Health program seeks to overcome several barriers to obtaining MSK care like access issues, financial limitations, and overall health literacy. **Referral from a local primary care provider is required for treatment.**

Hinge Health is only available to employees enrolled in UA’s PPO or HDHP medical insurance plans and their eligible, covered dependents. The Hinge Health program is available at no cost to eligible employees; all fees will be paid by UA.

Hinge Health membership tiers include 1) prevention, 2) acute injury, 3) chronic pain, or 4) pre- or post-rehab after surgery. Depending on your program tier, some of the available Hinge Health features and services include:

- All-in-one app on your own device or tablet provided by Hinge Health,
- Focus on health equity with 24/7, multilingual support and closed captions,
- Expert clinical care team including PTs, health coaches, and surgeons,
- Computer vision and wearable sensors to guide therapy for every body part,
- Real-time exercise adjustments based on the member’s ability,
- FDA-cleared Enso device for everyday relief of chronic pain,
- Women’s Pelvic Health pathway to support women with pelvic floor disorders,
- Prior authorization and live sessions allow for intervention & care coordination, and MANY MORE!

Additional information about Hinge Health, including program enrollment details, will be available starting Jan. 1, 2024. You can join the Hinge Health waitlist to be notified as soon as enrollment opens!

https://my.hingehealth.com/onboarding/universityofalabama/waitlist
PHARMACY
COVERAGE INCLUDED IF ENROLLED IN UA’S PPO OR HDHP MEDICAL PLAN

PRESCRIPTION CATEGORIES

MAINTENANCE RX

Maintenance drugs are commonly used to treat conditions that are considered chronic or long-term. These conditions usually require regular, daily use of medicines. Examples of maintenance drugs are those used to treat high blood pressure, heart disease, asthma and diabetes. Prime Therapeutics has a list online.

SPECIALTY RX

Specialty drugs are generally prescribed for people with complex, chronic medical conditions such as multiple sclerosis, hemophilia, hepatitis C and rheumatoid arthritis. These high-cost drugs have one or more of the following characteristics: injected or infused, but some may be taken by mouth; unique storage or shipment requirements; additional education and support required from a doctor; and usually not stocked at retail pharmacies. Accredo is the dedicated specialty pharmacy for Prime Therapeutics.

PRESCRIPTION RESTRICTIONS

FORMULARY

The HDHP and PPO plans use the same formulary, the four-tiered NetResults 1.0 Drug List (standard) for Large Group Plans. You can view prescription drug lists on the Blue Cross & Blue Shield website. Certain drugs are excluded from the formulary and cannot be dispensed under the plan. The formulary is updated by Prime Therapeutics once per quarter.

UTILIZATION MANAGEMENT

Plans require utilization management on some drugs to keep you safe, by helping to make sure the medicines you take are prescribed by your doctor and used correctly. Utilization management is made up of programs like: Step Therapy, Prior Authorization, and Quantity Limits. For example, step therapy may require you to try a generic drug first before you can be prescribed a brand name drug; or prior authorization may require a specific diagnosis.

PHARMACY NETWORK

A provider network is a list of in-network pharmacies that your plan contracts with to fill prescriptions for you. Visit www.bcbsal.org and use the ‘Find A Doctor’ tool to help locate in-network pharmacies.

HOME DELIVERY

Mail order is a convenient and cost-effective way for you to order up to a 90-day supply of maintenance medication for delivery to your home. Prime’s Home Delivery is managed by Amazon MedsYourWay.
A Flexible Spending Account (FSA) is a tax-favored account that allows you to pay for eligible out-of-pocket healthcare and childcare expenses. Because the amount you contribute to your FSA is deducted from your pay before taxes are calculated, your taxable income is lower, and you pay less in taxes. You must contribute a minimum of $125 per year to open an FSA. FSAs are subject to the IRS “use it or lose it” rule, which means that any amount not used to cover eligible expenses incurred during the year is forfeited. It is important to plan and estimate the amount you think you’ll spend during the upcoming year.

**HEALTHCARE**

Used to pay for eligible out-of-pocket healthcare expenses not covered by your medical, dental or vision insurance. Your full annual contribution will be available to use in January. You are eligible to elect the HCFSA only if you are enrolled in the PPO medical plan, or no medical plan.

**DEPENDENT CARE**

Used to reimburse you for childcare for dependents under age 13, elder care and care for other eligible dependents, enabling you and your spouse to work outside the home or attend school. Your account balance will accrue as each contribution is deducted from your paycheck(s).

**ANNUAL CONTRIBUTION LIMITS**

**HEALTHCARE FSA**

Increasing by $200 from $2,850 in 2023 to $3,050 in 2024

**DEPENDENT CARE FSA**

$5,000 combined, or $2,500 for married tax payers filing separate returns

**SUBSTANTIATE EXPENSES**

The Internal Revenue Service (IRS) requires PayFlex to verify that all FSA debit card transactions and reimbursements are for eligible medical or childcare expenses, a process also known as substantiation.

**DON'T FORGET**

Action is required if you want to participate in an FSA for 2024. You must login to Benefitfocus, select a new annual contribution amount for next year, and confirm your enrollment. If you do not enroll, then your FSA will end Dec. 31, 2023.

hr.ua.edu/benefits/openenrollment
A Health Savings Account (HSA) is a tax-favored savings account available only to individuals enrolled in UA’s HDHP. HSAs are like individual savings accounts at your bank, but the funds can only be used to pay for eligible healthcare expenses, including dental & vision. You must elect the HSA in order to receive UA’s contribution (seed money), but there is no required minimum to contribute. Unlike a HCFSA, it is your individual responsibility as a taxpayer to ensure HSA funds are used for eligible expenses. PayFlex will not ask you to substantiate expenses.

**ANNUAL CONTRIBUTION LIMITS**

<table>
<thead>
<tr>
<th>Type</th>
<th>Limit</th>
<th>Seed Money Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee Only Contracts</strong></td>
<td>$4,150 limit, including $500 seed money contribution from UA</td>
<td></td>
</tr>
<tr>
<td><strong>Family Contracts</strong></td>
<td>$8,300 limit, including $1,000 seed money contribution from UA</td>
<td></td>
</tr>
</tbody>
</table>

**CATCH-UP CONTRIBUTIONS**

Eligible employees who are 55 or older by the end of the tax year can increase their HSA annual contribution limit up to $1,000 a year. This extra amount is known as a catch-up contribution.

**MEDICARE LIMITATIONS**

Due to IRS rules, once you enroll in Medicare you are no longer allowed to contribute to an HSA. While you can continue to spend from your HSA, you cannot set up or contribute to an HSA in any month that you are enrolled in Medicare. You should stop contributing to your HSA six months before you apply for Medicare or Social Security retirement benefits to avoid potential tax penalties.

**Retirement Savings Tool**

Once you have a $1,000 minimum balance, HSA’s offer IRA-like investments including annuities and mutual funds. To maximize your savings potential — contribute, save and invest. Scan the QR code to learn more.

**Employee Ownership**

You own the money in your HSA, even if you leave UA or switch to the PPO medical plan in the future. You can increase, decrease or stop HSA contributions at any time during the year. You also control how and when your money is spent.
QUALIFIED EXPENSES FOR TAX FAVORED ACCOUNTS

Examples of Eligible Expenses:
- Medical or or pharmacy copayments
- Prescription eyeglasses or contact lenses
- Dental copayments/deductibles and braces
- Hearing aids
- Over-the-counter products for pain relief, thermometers, and cold and flu medicines
- First aid kits
- Antihistamines
- Blood pressure monitors

Examples of Ineligible Expenses:
- Medical and dental premiums
- Vitamins and supplements for general wellness (unless prescribed by a doctor with a letter of medical necessity)
- Elective cosmetic procedures and dental procedures to whiten teeth
- Estimated charges for dental and/or vision care
- Credit card processing fees
- Extended vision plan warranties
- Fines for missed appointments, etc.

Important Reminder

The IRS requires PayFlex to verify all FSA debit card transactions are for eligible medical expenses, a process known as substantiation. When you use your debit card to access funds from your HCFSA, PayFlex has established systems and rules to automatically verify funds are used for an eligible expense including the ‘Connected Claims’ feature linked to your UA medical and dental plans. However, sometimes PayFlex can't verify that funds were used for eligible expenses. If this occurs, you will receive a “Request for Documentation” notice on your member dashboard, by email or mail based on account settings. If your transaction is identified as not eligible for reimbursement, then your HCFSA may be subject to correction procedures, including 1) suspending the use of your debit card until required documentation is received OR 2) the exact amount is paid back to your account.

Contact PayFlex to discuss details!

(205) 348-7732
www.payflex.com
DENTAL

BlueCross BlueShield of Alabama

Service Categories

- Diagnostic & Preventive (exams and cleanings)
- Restorative (Fillings and Root Canals)
- Supplemental (Oral Surgery and Anesthesia)
- Periodontic (Gum Disease)
- Prosthetic (Crowns and Dentures)
- Orthodontic (Braces) only for dependent children up to 18 years old

12-Month Waiting Period

The plan covers Diagnostic & Preventative services immediately as of the effective date of coverage. However, a 12-month benefit waiting period applies to all new enrollees (including newly enrolled dependents added through a QLE or during Open Enrollment) for all other service categories. The 12-month waiting period can be waived by providing proof of prior dental insurance coverage during the last 12 months, with no greater than a 63-day break in coverage.

Send proof of prior coverage to HR Service Center, or upload to your Document Center in Benefitfocus.

Deductible: $50 per member per year; $150 aggregate family maximum.

Annual Dental Coverage Maximum: Combined in and out-of-network maximum of $1,000 per member per year. Additional $500 benefit available if services are received in-network.

Lifetime Orthodontic Maximum: $1,000 lifetime maximum per person.

hr.ua.edu/benefits/openenrollment
Covered Services

- One pair of standard prescription lenses for eyeglasses every 12 months
- One pair of frames from UHC collection, OR $130 frame allowance credit at private providers or retail locations every 24 months
- In lieu of lenses and frames, fitting/evaluation fees, covered in-full contacts, and up to two follow-up visits with $20 materials copay; OR $150 contact allowance for all other contacts

Special discounts available:

- QualSight LASIK, laser vision correction services
- 20% discount on additional pair of eyeglasses
- 10% off extra contacts ordered from uhccontacts.com
- 20% discount on Blue Light Eyesafe® screen filters for their devices
- Save on custom-programmed hearing aids when you buy from UHCHearing.com with code MYVISION

Important ID Card Notice:
You will not receive a hard-copy of a vision ID card upon enrollment, but can visit www.myuhcvision.com to register for an account and download a digital copy. Many private practice providers and retail chain locations can lookup your contract information without an ID card.
Your Group Life & Disability Options

The following plans are employer-sponsored and provided for FREE to all regular, full-time employees. Your coverage will default in Benefitfocus, however, you’re encouraged to review your beneficiaries each year.

Sponsored Plans

GROUP TERM LIFE
UA provides a group term life insurance plan that pays your beneficiary a designated amount upon your death. Coverage varies by salary range from $30,000 up to 125% of annual salary, with a maximum benefit of $300,000. The group term life coverage comes with a special Accelerated Benefit Option, granting you access to up to 80% of your life insurance proceeds (max $240,000) should you become terminally ill and are diagnosed with less than 12 months to live.

LONG-TERM DISABILITY
UA provides a long term disability (LTD) plan for income replacement if you are unable to return to work due to disability from a non-work-related injury or illness. The plan pays at 66 2/3% of current salary (max $10,000 per month) after a 90-day waiting period. If The Standard approves your claim, benefits are payable on the 91st day from date of disability. After 90 days of payments, the plan changes to pay 60% of predisability earnings reduced by deductible income and continues at that rate for the duration of the claim (or until you reach age 65).

ACCIDENTAL DEATH & DISMEMBERMENT
UA provides a group Accidental Death & Dismemberment (AD&D) policy in the amount of a flat $22,500 payable if death was caused by an accident. In instances where the employee’s death was caused by an accident, the beneficiary would receive both the UA Group Term Life and AD&D benefit. AD&D also pays a benefit if a serious injury results in dismemberment (i.e., if you lose a limb or the ability to see, you may be paid a part of your benefit).

Here is the reason why BENEFICIARIES MATTER

By having a current beneficialy on all your accounts, you leave no doubt as to what you wish to be done with your insurance proceeds. If you die and have not named a beneficiary, this will delay the transfer of funds needed to take care of final expenses, like funeral costs. Keeping your beneficiary information up to date helps ensure the financial wellness of your loved ones.

PLAN DOCUMENTS AND ADDITIONAL INFORMATION AVAILABLE ONLINE:
hr.ua.edu/benefits/disability-and-life-insurance
Your Life & Disability Options

The following plans are voluntary, employee-paid plans and available to all regular, full-time and part-time employees. You may be required to provide Evidence of Insurability if you add new or increase coverage during Open Enrollment. See details below.

Voluntary Plans

Voluntary Life

This benefit provides additional life insurance coverage to help defray the loss of income and help your loved ones in the event of your death. You may purchase additional term life coverage of 1 to 5 times your annual salary rounded to the nearest $1,000, OR in $50,000 increments. Max coverage is the lesser of 5x salary or $1,400,000. For your spouse, you may elect the lesser of the your voluntary life amount and $150,000 (in $10,000 increments). For your dependent child(ren), you may elect $10,000 for children up to age 26.

Voluntary AD&D

This benefit provides additional AD&D coverage with a minimum of $25,000. The maximum amount you can receive is the lesser of 10 times base annual earnings or $500,000. Additional coverage can help defray the loss of income and help your family maintain the household in the event of your death. You may choose coverage for yourself, your spouse and/or your dependent child(ren) under the Family Plan.

Voluntary STD

Short-term disability (STD) is a post-tax, employee-paid benefit. STD pays 60% of your salary (up to a max weekly benefit of $1,000) if you become temporarily disabled, meaning you are unable to work for a short period of time due to illness, pregnancy or injury. There are two STD plan options with different benefit waiting periods (14 days or 29 days) which is the amount of time from your date of disability to the date weekly payments begin. Documentation of disability from your doctor is required to file a claim.

Evidence of Insurability (EOI)

EOI is documented proof of good health. It is an application process for underwriting purposes through which you provide a Medical History Statement about the condition of your health and/or your dependent’s health in order for The Standard to evaluate you for life insurance coverage. EOI is required for any changes to coverage requested outside of the 60-day guaranteed issue window for new employees.

Plan Documents and Additional Information Available Online:
hr.ua.edu/benefits/disability-and-life-insurance
Did You Know?

Of identity theft victims who contacted the Identity Theft Resource Center in 2018:

42% noted that as a result of their identity theft incident they are in debt and

40% said that they could not pay their bills.

85% felt worried, angry and frustrated because of their identity theft

32% felt that the incident caused problems for them at their place of employment (either with their boss or coworkers).

Call
844-698-8640

Scan the QR code for more info.
## Employee Premiums

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Coverage Level</th>
<th>Biweekly Rate (24 Pay Periods)</th>
<th>12-Month Rate (12 Pay Periods)</th>
<th>9-Month Rate (Sept. thru May)</th>
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<td>$28.50</td>
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<td>Employee Only</td>
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<td>Vision</td>
<td>Employee + One</td>
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<td>Family</td>
<td>$9.49</td>
<td>$18.97</td>
<td>$25.29</td>
</tr>
</tbody>
</table>

- **Non-exempt staff** are paid biweekly over 26 pay periods per year with benefit premiums deducted from 24 paychecks.
- **Exempt, monthly-paid faculty and staff** are paid over 12 pay periods per year with benefit premiums deducted from all paychecks.
- However, **exempt faculty** who provide services only during the academic year (Aug. 16 – May 15) may elect to be paid over 9 months instead of 12 months. For 9-month faculty, insurance coverage will continue for the full calendar year, but higher benefit premiums are deducted over 9 paychecks. For additional information about pay distribution, contact Payroll.
MEDICAL PREMIUM DISCOUNT AVAILABLE

The University provides premium assistance to active, benefit-eligible employees by giving a medical premium discount based on (1) family size and (2) total combined household income (1.5x the Federal Poverty Level). The amount of the discount is $57 per month, equal to the lowest cost employee only premium for the HDHP medical plan.

Estimate your eligibility for the discount using the chart below:

### 2024 Premium Assistance (1.5 x 2023 Federal Poverty Level)

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Total Annual Combined Household Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$21,870</td>
</tr>
<tr>
<td>2</td>
<td>$29,580</td>
</tr>
<tr>
<td>3</td>
<td>$37,290</td>
</tr>
<tr>
<td>4</td>
<td>$45,000</td>
</tr>
<tr>
<td>5</td>
<td>$52,710</td>
</tr>
<tr>
<td>6</td>
<td>$60,420</td>
</tr>
<tr>
<td>7</td>
<td>$68,130</td>
</tr>
<tr>
<td>8</td>
<td>$75,840</td>
</tr>
</tbody>
</table>

To apply for this discount, active employees must submit the Premium Assistance Application and furnish acceptable proof of total annual household income based on their most recently filed Federal Income Tax Return, W-2s and 1099s. To apply for Premium Assistance, visit hr.ua.edu/benefits/premium-assistance or scan the QR code below.

**APPLICATION DEADLINES:**

- **Current Employees** – Apply and submit documentation annually during Open Enrollment
- **New Employees** – Must apply and submit documentation within 30 days from date of hire
# CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Carrier Contact</th>
<th>Telephone</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical and Dental</td>
<td>Blue Cross and Blue Shield of AL</td>
<td>1-800-239-5772</td>
<td><a href="http://www.bcbsal.org">www.bcbsal.org</a></td>
</tr>
<tr>
<td>Pharmacy</td>
<td>Prime Therapeutics</td>
<td>1-800-391-1886</td>
<td><a href="http://www.primetherapeutics.com">www.primetherapeutics.com</a></td>
</tr>
<tr>
<td>Vision</td>
<td>UnitedHealthcare Vision</td>
<td>1-800-638-3120</td>
<td><a href="http://www.myuhcvision.com">www.myuhcvision.com</a></td>
</tr>
<tr>
<td>Flexible Spending Account, Health Savings Account</td>
<td>PayFlex</td>
<td>1-844-729-3539</td>
<td><a href="http://www.payflex.com">www.payflex.com</a></td>
</tr>
<tr>
<td>Life, AD&amp;D, Short-Term Disability, Long-Term Disability</td>
<td>The Standard</td>
<td>1-855-757-4714</td>
<td><a href="http://www.standard.com">www.standard.com</a></td>
</tr>
<tr>
<td>Identity Protection</td>
<td>LifeLock Norton</td>
<td>1-800-607-9174</td>
<td><a href="http://www.lifelock.com">www.lifelock.com</a></td>
</tr>
</tbody>
</table>

**HUMAN RESOURCES SERVICE CENTER CONTACT INFORMATION**

The HR Service Center provides employees with a convenient location to handle all of their benefits, employment and payroll needs. The HR Service Center is located in the Employee Resource Center at 1515 Flint River Drive, Tuscaloosa, AL 35487 on the University Services campus. The HR Service Center is staffed Monday through Friday from 8:00 a.m. to 5:00 p.m., subject to The University of Alabama’s holiday schedule.

Please call **(205) 348-7732** or email hr@ua.edu for immediate assistance with Open Enrollment.