UNIVERSITY OF ARKANSAS AT PINE BLUFF



NEW EMPLOYEE ENROLLMENT BENEFITS BOOKLET







RETIREMENT | HEALTH | DENTAL | VISION | FLEXIBLE SPENDING HSA | WELLNESS | VOLUNTARY PRODUCTS | TIME OFF | DISABILITY

Revised 07/01/2025cah

Welcome to the University of Arkansas at Pine Bluff. Choosing your employee benefits is one of the most important decisions you will make as an employee. Review the information in this booklet and the information available from the New Employee Benefits Section of the Human Resources website carefully to make sure that you are making informed decisions.

You must be 50% appointed (average 20+ hours) or greater and not in a student position, such as Senior Graduate Assistant, Graduate Assistant, or Extra-Help to be eligible for employee benefits through the University of Arkansas at Pine Bluff.

Participation in certain benefits is mandatory and considered a condition of employment. Mandatory insurance benefits are 100% paid by the University. Mandatory benefits are:

- Basic Life Insurance
- Basic Short-Term Disability Insurance (for Classified Staff only)
- Basic Long-Term Disability Insurance
- Employer contributions to retirement
- Required employee contributions to retirement

The other University of Arkansas at Pine Bluff benefits, like health coverage, dental coverage, and insurance, accidental death & dismemberment insurance, are optional and can be waived. Employees pay for all or a portion of the premiums for optional benefits. Completion of the enrollment process is required, even if you only plan to enroll in the mandatory benefits. See the *"How Do I Enroll?"* section of this booklet for enrollment instructions.

New employees have 31 days from their benefits-eligible appointment dates to enroll in their benefits. Mandatory benefits are effective with your benefits-eligible appointment date. Optional benefits are effective the first day of the month following your benefits-eligible appointment date or the date you complete the benefits enrollment process, whichever is later. Documentation of dependent eligibility is required to cover eligible family members on your health and dental coverage and vision insurance.

Contact Human Resources at 870-575-8400 or by email at <u>hrbenf@uapb.edu</u> if you have any questions.



"WELCOME TO THE PRIDE"

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How Do I Enroll?

Dependent Documentation

You must submit dependent documentation if you are covering dependents on your UA health, dental or vision insurance. Send legible copies, not originals. Required documents are:

- **Spouse** government-issued marriage license signed by the county clerk, state registrar or other assigned government official.
- Biological child government-issued birth certificate identifying you as the parent (hospital certificate acceptable only for children less than 31 days old).
- Step-child governmentissued birth certificate identifying your spouse as a parent AND a governmentissued marriage license showing you married to a parent.
- Adopted child court document showing adoption placement, petition for adoption or final adoption certificate (must include date of birth)
- Legal Ward/Guardian Child/Foster Child under age 18 – court or agency documentation AND a government-issued birth certificate
- Medical Support Order court documents ordering you to provide insurance for your biological child
- Adult Disabled Child government-issued birth certificate identifying you as a parent AND medical certification of disability prior to age 26. If a stepchild, a governmentissued marriage license also required.

Now it's time for you to complete your enrollment in your University of Arkansas at Pine Bluff benefits. Remember you only have 31 days from the date of your benefits-eligible appointment to complete the enrollment process. Your optional benefits will be effective the first day of the following month following the date you complete the enrollment process.

Here's what you'll need before you begin:

- Covered dependents' names, dates of birth, gender, and social security numbers (required for enrollment in health insurance).
- Beneficiaries' names, dates of birth, gender, and relationship to you.
- Documentation of Dependent Eligibility is required for covering any dependent on your UAPB's health, dental and vision insurance plans (see column to left for requirements).

COMPLETE YOUR ONLINE BENEFITS ENROLLMENT PROCESS

You can complete your benefits enrollment online using Workday. Additional information is available from the New Employee Benefits Enrollment section of Human Resources website.

- Open Google Chrome and go to <u>http://myapps.microsoft.com/</u>.
- 2 Click on the Workday application.
- Once your onboarding is complete, you will have an Inbox item labeled "Benefits Change for Life Event." Click on the inbox item and complete your enrollment. Note: If you are covering dependents, you will be prompted to upload your documentation
- 4 Your enrollment will go to the Benefits Partner for approval. Benefits are effective the first day of the following month after your enrollment and documentation are submitted to the Benefits Partner.

You can also complete a paper enrollment process and submit the forms to Human Resources. Partial enrollment paperwork will not be accepted. Do not complete and turn in enrollment forms if you complete the Workday enrollment process above. Forms are available on the UAPB's Human Resources home page by clicking on Forms and in the Office of Human Resources. Submit completed enrollment forms to Human Resources:

University of Arkansas at Pine Bluff Human Resources 1200 N University Drive MailSlot 4942 Administration Building, Room 205 FAX: 870-575-4658 Email: hrbenf@uapb.edu

Retirement

UA Retirement Plan – 403(b)/457(b) plan

Participation in a retirement plan is required for all University of Arkansas benefits-eligible employees. The University of Arkansas at Pine Bluff Retirement plan is a 403(b)/457(b) Defined Contribution Plan. A Defined Contribution Plan is a plan that does not pay a specific benefit when you retire and where the retirement benefit is dependent on the earnings or losses of your chosen investment options. At retirement or separation of service from the UAPB, you can withdraw your vested contributions in lump sum amounts over time subject to plan limitations.

Employee and Employer Contributions

Employees are required to contribute 5% of their gross pay to their UAPB retirement plan. The University's contribution will not be less than 5% and will increase to match your combined required and voluntary contributions in excess of 5% up to a maximum employer contribution of 10%. Employees may contribute additional unmatched contributions in excess of 10%. Contributions are subject to IRS limits.

Your Required	Your Voluntary	University	Total
5%	0%	5%	10%
5%	1%	6%	12%
5%	2%	7%	14%
5%	3%	8%	16%
5%	4%	9%	18%
5%	5%	10%	20%
5%	6+%	10%	21%+

Vesting

Employer retirement contributions for all faculty and staff hired July 1, 2016, and after will be vested at the end of 24 consecutive months of employment in a benefits-eligible position. Employee contributions are 100% vested immediately. Employees not vested when UAPB employment ends will forfeit any employer contributions made by the University of Arkansas. The University of Arkansas at Pine Bluff has a **once-vested**, *always-vested* rule. If you previously worked for any UA System campus and were vested when you left employment, you will retain that vesting status when you are re-employed by any UA System Campus. Be sure to let HR know of any prior UA System employment. If you are not vested when you leave UAPB employment and return to the UAPB with a separation of more than 30 days your vesting period will start over again.

Additional Information

Go to the Human Resources website to find the Retirement Summary Plan Description and other additional information.

- Go to UAPB HR's home page
- Click on "Benefits"
- Click on <u>Summary Plan</u>
 <u>Description</u>

Required Contributions

The required employee contribution must be tax-deferred.

What is Vesting?

UAPB Retirement Plan -Nonforfeitable ownership by employees of retirement contributions made by the employer on their behalf. In addition to the 24-month vesting rule, you will also be vested if, while employed in a benefits-eligible position:

- You die
- You reach the age of 65
- You become disabled as determined by Social Security or UA's Disability Insurance provider.

Retirement

Employee Required

Contributions are not included in the 402(g) limits but will be included in the overall 415(c) plan contribution limits (combined employee and employer contributions. For more information, please, go tohttps://benefits.uasys.ed u/retirementplan/university-ofarkansas-retirement-plan/

Prior Contributions

Your retirement limits accumulate from all employer sources for the calendar year. If you think that your combined contributions for the calendar year will reach your retirement limits, contact HR with other retirement plan participation information.

Can I change my original retirement elections?

You can change your voluntary retirement contribution elections every month. This includes the amount you are contributing and changing your vendor choice between TIAA & Fidelity. You cannot contribute to both TIAA & Fidelity in the same pay cycle. You can change your contribution or vendor any time online through Workday.

How Much Can I Contribute?

Employees can contribute up to 100% of their salaries after required taxes and other payroll deductions, not to exceed the IRS limit. For yearly maximum contributions, please go to <u>https://benefits.uasys.edu/retirement-plan/university-of-arkansas-retirement-plan/</u>.

The 403(b) plan is the UAPB Retirement Plan's primary plan. You will only participate in the 457(b) plan if you reach your 402(g) limit in your 403(b) plan before the end of the calendar year. You will provide your directions for handling your contributions if you reach your 403(b) or 402(g) limits when completing your retirement plan enrollment.

How Do I Contribute?

You may contribute to your 403(b) plan in two ways:

- **Traditional tax-deferred** contributions and earnings will be subject to income taxes when withdrawn. The required contribution is tax-deferred.
- Roth after-tax voluntary contributions made on an after-tax basis and are included in current taxable income; earnings are tax exempt if they are part of a qualified distribution (at least 5 years from the year of your first UA Roth 403b contribution and after you have reached age 59½).

You will want to choose your Roth and tax-deferred contributions based on your age, time horizon and current/future tax bracket.

Where Do I Contribute?

The University of Arkansas at Pine Bluff Retirement Plan offers many investment options through one or both fund sponsors:

- Fidelity Investments –Go to <u>netbenefits.com/uark</u> or call Fidelity directly at 1-800-343-0860 to learn more.
- **TIAA** Teachers Insurance and Annuity Association. Go to <u>www.tiaa.org/uasys</u> or call TIAA directly at 1-800-842-2252 to learn more.

UAPB employees have the option of investing their contributions in a streamlined selection of funds or setting up a self-directed brokerage account to invest in their choice of thousands of mutual funds. TIAA and Fidelity will continue to be the investment providers but funds from Vanguard, JP Morgan and others will be available in the core lineup through both Fidelity and TIAA. See the next page for the funds available. If you do not make a fund election you will be defaulted to the Target Date Funds closest to your 65th birthday.

Retirement

⁴ Guide to the University of Arkansas at Pine Bluff Benefits

To simplify your choices, the University has created the following investment tiers within Fidelity and TIAA's lineup so you can choose an investment style that helps you meet your retirement goals and needs. You do not need to choose from just one category; you may invest using any or all of these categories.

Tier 1: Target Date Funds	Ticker	Plan
Vanguard Institutional Target Retirement Income Fund Institutional Shares Vanguard Institutional Target Retirement 2010 Fund Institutional Shares Vanguard Institutional Target Retirement 2015 Fund Institutional Shares Vanguard Institutional Target Retirement 2020 Fund Institutional Shares	Symbols VITRX VIRTX VITVX VITWX	
Vanguard Institutional Target Retirement 2025 Fund Institutional Shares Vanguard Institutional Target Retirement 2030 Fund Institutional Shares Vanguard Institutional Target Retirement 2035 Fund Institutional Shares Vanguard Institutional Target Retirement 2040 Fund Institutional Shares Vanguard Institutional Target Retirement 2045 Fund Institutional Shares Vanguard Institutional Target Retirement 2050 Fund Institutional Shares Vanguard Institutional Target Retirement 2050 Fund Institutional Shares Vanguard Institutional Target Retirement 2055 Fund Institutional Shares Vanguard Institutional Target Retirement 2055 Fund Institutional Shares Vanguard Institutional Target Retirement 2050 Fund Institutional Shares	VRIVX VTTWX VITFX VIRSX VITLX VTRLX VIVLX VIVLX	Both Fidelity & TIAA
Tier 2: Passive Funds	Ticker Symbols	Plan
Vanguard Extended Market Index Fund Institutional Shares Vanguard Institutional Index Fund Institutional Shares Vanguard Total Bond Market Institutional Shares Vanguard Total International Stock Index Fund Institutional Shares	VIEX VINIX VBTIX VTSNX	Both Fidelity & TIAA
Tier 3: Actively Managed Funds	Ticker Symbols	Plan
American Funds Europacific Growth Fund CREF Money Market CREF Social Choice Account CREF Stock Account Class Harbor Capital Appreciation Retirement Metropolitan West Total Return Bond Plan TIAA Real Estate Account TIAA Traditional	RERBX QCMMIX QCSCIX QCSTIX HNACX MWTSX QREARX GRA	τιαα
Fidelity [®] Contrafund [®] - Class K Fidelity [®] Diversified International Fund – Class K Fidelity [®] Total Bond Fund Lincoln Stable Value Fund Principal Real Estate Securities Institutional Call Vanguard FTSE Social Index Fund Investor Shares	FCNKX FDIKX FTBFX HLSVAX PIREX VFTSX	Fidelity
MassMutual Small Cap Growth Equity Fund Goldman Sachs Small Cap Value Class R6 JP Morgan Value Advantage Fund Class L MassMutual Select Mid Cap Growth Equity Fund II Class I MFS Mid Cap Value Fund Class R6 Vanguard Federal Money Market Fund Investor Shares	MSGZX GSSUX JVAIX MEFZX MVCKX VMFXX	Both Fidelity & TIAA
Tier 4: Self Directed Brokerage		Plan
Provides you with the opportunity to invest in a broad range of investment of beyond those offered directly through the plans. Contact Fidelity at 800-343 a fact sheet and a commission schedule for applicable fees and risks. Contact 800-927-3059 if you have questions about a TIAA Brokerage Account. The si- directed brokerage tier includes investments beyond those in the plan lineu plan neither evaluates nor monitors the investments available in the self-dir brokerage tier. It is your responsibility to ensure that the investments you si- suitable to your situation.	Both Fidelity & TIAA	

Contact Fidelity directly: 1-800-343-0860 netbenefits.com/uarkhtt p://www.tiaacref.org/uasys To schedule Individual Counseling, call:

Contact TIAA directly: 1-800-842-2552

1-800-642-7131

www.tiaa.org/uasys To schedule Individual Counseling, call: 1-800-732-8353

Individual Counselors from both Fidelity &

TIAA are usually available on campus to provide free, on-site, individual retirement planning counseling sessions. Contact Fidelity & TIAA directly for appointments and/or check the Campus Bulletin in the Human Resource section.

In-Service Cash is available to active employees age

59 ½ and older. Using this option, active employees can have access to their (employee) contributions while still employed. Employees must separate from service to have access to employer contributions.

You should review the UAPB Retirement Summary Plan Description (SPD) for a more detailed summary of plan provisions

Health Coverage

Additional Information

Go to the Human Resources website to find the Summary Plan Description, Plan Comparisons, Prescription Formulary, and other additional information.

- Go to https://www.uasys.e du/
- Go to "Benefits"
- Click on <u>Health &</u>
 <u>Wellness Medical</u>
- Click on <u>Medical</u>
 <u>Benefit Summary</u>
 <u>Plan Description</u>

Whom can I cover?

- Your lawful spouse,
- Children from birth to the date they turn 26
- Children include biological child, legally adopted child, stepchild, and eligible foster child,
- Dependent Eligibility Documentation is required. See "How Do I Enroll" pages 28-29 for additional information.

The University of Arkansas Health Coverage Plan is a self-funded plan. Claims are administered by **UMR** (a division of United Healthcare) and participants use UMR providers as their in-network providers. The prescription drug portion of the University's Health Coverage plan is administered by **MedImpact**. Both UMR and MedImpact offer nation-wide networks of providers.

You have a choice of three health plans (all administered by UMR) for you and your family's health coverage:

CLASSIC PLAN

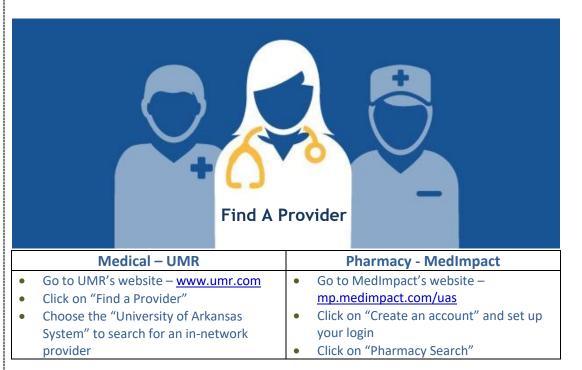
If you select the Classic Plan, you will have mid-range premiums & mid-range out- ofpocket costs. There are no benefits for out-of-network providers other than for true emergencies. Participants are eligible for a healthcare FSA.

HEALTH SAVINGS PLAN

If you select the Health Savings Plan, you will have the lowest premiums but will have the highest out-of-pocket costs. Services for out-of-network providers will be covered at reduced rates. Participants are eligible for a Health Savings Account (HAS.

PREMIER PLAN

If you select the Premier Plan, you will pay the highest premiums but will have the lowest out-of-pocket costs. Services for out-of-network providers will be covered at reduced rates.



University of Arkansas System Medical Plans Comparison Summary

Beginning January 1, 2025, here's what you'll pay under each medical plan.

		Class	ic Plan	Prem	ier Plan	Health S	avings Plan	
		SmartCare	Non-SmartCare	SmartCare	Non-SmartCare	SmartCare	Non-SmartCare	
Deductible	Individual	\$800	\$1,350	\$500	\$800	\$	3,300	
Family		\$1,600	\$2,700	\$1,000 \$1,600		ş	6,000	
Coinsurance		20%	25%	15%	20%	5%	10%	
Out-of- Pocket	Individual	\$4,750 Wellness: \$3,450	\$5,250 Wellness: \$4,000	\$2,700 Wellness: \$2,350	\$3,200 Wellness: \$2,700	\$6,250	\$6,750	
Maximum	Family	\$9,500 Wellness: \$6,900	\$10,500 Wellness: \$8,000	\$5,400 Wellness: \$4,700	\$6,400 Wellness: \$5,400	\$12,300	\$13,300	
Primary Care	Office Visit	\$20	\$35	\$10	\$25	5% after deductible	10% after deductible	
Specialist Offi	ce Visit	\$40	\$55	\$30	\$45	5% after deductible	10% after deductible	
Preventive Ca ACA- and ACIP wellness and w visits, immuniz and screenings	-compliant vell-baby ations		0% of ACA- and preventive care		0% of ACA- and preventive care		00% of ACA- and d preventive care	
Disposable Medical Supplies Test strips, oxygen filters, lancets, etc.			%, up to \$800 in le supplies	Plan covers 100%, up to \$800 in disposable supplies		10% after deductible		
Hospital Inpatient Services		\$150 copay, then 20% after deductible	\$300 copay, then 25% after deductible	\$150 copay, then 15% after deductible	\$300 copay, then 20% after deductible	5% after deductible	10% after deductible	
Emergency Ro	oom Visit		then 25% after ived if admitted)	\$350 copay, then 20% after deductible (waived if admitted)		10% after deductible		
Therapy Services Speech, physical, occupational (copay on initial evaluation visit only)		\$40 evaluation copay, then 20% after deductible	\$55 evaluation copay, then 25% after deductible	\$30 evaluation copay, then 15% after deductible	\$45 evaluation copay, then 20% after deductible	5% after deductible	10% after deductible	
Outpatient Di Lab Services	agnostic	20%	25%	15%	20%	5% after deductible	10% after deductible	
Outpatient Di Testing and Se Services		20% after deductible	\$160 copay, then 25% after deductible	15% after deductible	\$80 copay, then 20% after deductible	5% after deductible	10% after deductible	
Advanced Imaging CT, PET, MRI (prior authorization required)		\$75 copay, then 20% after deductible	\$150 copay, then 25% after deductible	\$50 copay, then 15% after deductible	\$100 copay, then 20% after deductible	5% after deductible	10% after deductible	
Urgent Care Visit		\$	55	ş	50	10% afte	r deductible	
			Prescri	ption Drugs				
Out-of- Individual		\$1	,800	\$1,800			d medical and	
Pocket Maximum	Family	\$3	,600	\$3,600		prescription drug out-of-pocket maximum		
Tier 1		\$18	сорау	\$14 copay				
Tier 2		\$62	сорау	\$57	сорау	10% after deductible		
Tier 3		\$97	сорау	\$92	copay			
		d with no cost share	are these condees do	scribed in the United States Preventive Serv		lices Task Force & and B recommendation		

*Preventive services that are covered with no cost share are those services described in the United States Preventive Services Task Force A and B recommendations, the Advisory Committee on Immunization Practices (ACIP) of the CDC, and HRSA guidelines for women, as well as children, including the American Academy of Pediatrics Bright Futures periodicity guidelines.

Definitions and Other Information

Coinsurance: The percentage you pay toward the cost of covered services after you pay the deductible.

Copayment (copay): The fixed dollar amount you pay each time you receive a covered service or supply.

Deductible: The fixed dollar amount you pay each year before the plan pays for covered services. Innetwork and out-of-network deductibles accumulate separately and do not cross-apply.

EBRx: A UAMS service that provides prior authorization, appeal, and exception support for the health plan pharmacy program. Contact EBRx at 501.214.2156 or toll-free at 833.650.0475.

Emergency Room Visits: The emergency room visit copayment is waived if you're admitted to the hospital.

Medimpact: Provides pharmacy network access, customer service, and formulary support for the health plan pharmacy program. Contact MedImpact Pharmacy Services at 800.788.2949 or mp.medimpact.com/uas.

Out-of-Network Care: Not available to those enrolled in the Classic Plan (other than emergency services and services with prior authorization). The health plan has an extensive network of local and national providers, facilities, and centers of excellence. Additional out-of-pocket expenses apply to non-network providers and services.

Out-of-Pocket Maximum: The most you pay toward your deductible, coinsurance, and copayments (combined) in any calendar year. The out-of-pocket maximum does not include the prescription drug out-of-pocket maximum (Classic and Premier plans) or non-covered services.

Preventive Care Services: Include well-baby/ child visits, annual wellness exams, screenings, and immunizations, as provided in the ACA and ACIP guidelines. Prior Authorizations (PA): Required for many complex or inpatient services and procedures. Check the plan document or contact UMR for information on PAs. These are some examples of services requiring PA:

- Admission to inpatient facilities or partial hospitalization units
- Referral to out-of-network care
- Prenatal/maternity care
- Home health services
- Infusion services
- Hospice
- Transplants
- All advanced imaging (e.g., MRI, CT, stress test)

SmartCare: If you are enrolled in a University medical plan, you can save on health care costs by visiting a SmartCare provider at a University of Arkansas for Medical Sciences (UAMS) facility, the University of Arkansas Fayetteville Pat Walker Health Center, or the University of Arkansas Little Rock Health Center. Not all covered services and supplies are available through SmartCare; the SmartCare benefit does not transfer to other non-University providers or facilities.

- UAMS: 501.686.8749
- University of Arkansas Fayetteville: 479.575.4451
- University of Arkansas at Little Rock: 501.569.3188

UMR: Provides customer services, prior authorization, network access, and appeals reviews for the health plan. Contact UMR Health Plan Customer Service at 888.438.6105 or umr.com.



The information provided in this document is of a general nature only and does not replace or alter the official rules and policies contained in the official plan documents that legally govern the terms and operation of the University of Arkansas System benefit plans. If this publication differs in any way from the official plan documents, the official plan documents always govern. Receipt of this publication does not guarantee eligibility for benefits. The University of Arkansas System has the right to modify benefits at any time.

Health Plan Features



Infertility Treatment

In 2019, Infertility Treatment was added as a benefit of the University of Arkansas at Pine Bluff Health Plan. The maximum lifetime benefit is \$30,000 (\$20,000 for medical and \$10,000 for pharmacy). Coverage includes Associated IVF prescription drugs, Artificial insemination, Gamete intrafallopian tube transfer (GIFT), Intracytoplasmic sperm injections (ICSI), Medical costs for donor sperm/eggs, and genetic testing to diagnose infertility. Some exclusions apply. You can enroll in UMR's Maternity Management Program for assistance with claims, pre-approvals, and options. Call 844.604.6244 to enroll.

Claims Appeals

Employees who disagree with a denial of a medical claim or a rescission of coverage determination can request that the Plan review its initial determination by submitting a written request to the Plan. There are two levels of internal appeal and a third level through a right to an external review. There are timelines and specific procedures for all three levels of the appeals process. For more information and assistance with filing an appeal, please reach out to a Benefits Representative or refer to the Plan Description found on the UA System website: https://benefits.uasys.edu/health-and-wellness/medical/.

Health Coverage Premiums

Health Insurance premiums at the University of Arkansas at Pine Bluff are divided among four different salary bands. Employees in the lower salary bands receive a larger percentage of employer contributions than employees in the higher salary bands. On the next page, you will find listed the employee premiums for Health Coverage. Note, employees who are less than 100% appointed have different premiums which can be found on the HR website.

Prescription Drugs

The prescription part of the University of Arkansas at Pine Bluff Health Coverage plan is administered by **MedImpact**. MedImpact has a nation-wide network of pharmacies, including most chains. The UA prescription drug formulary is maintained by the University of Arkansas System Pharmacy Advisory Committee, which is composed of faculty and clinical pharmacists, physicians and nurse practitioners who advise the Committee on the most recent medical research results. The Committee's recommendations are based on the latest available evidence-based studies.

You pay one co-payment for each 30-day supply of drugs. Certain maintenance medications will allow you to get a 90-day supply (one copayment for each 30-day supply) after you have filled two 30-day supplies.

Specialty Drug Distribution Program

MedImpact Direct Specialty will handle claims for all specialty drugs. These drugs will be filled through one of two partnered pharmacies: UAMS or Kroger. If you are on one of the following medications, you will need to set up an account with one of the partnered pharmacies to fill your prescriptions: Humira, Enbrel, Otezla, Xolair, Imbrucvica, Revlimit, Ibrance, Xtandi, Jakafi, Venclextra, Imatinib, Deplixent, Gilenya, Stelara, Tecfidera, Cimzia, Glatopa, or Capecitabine. Please call 1-877-391-1103 for questions regarding this program. This program does not affect your tier, copay, or coinsurance.

HEALTHY YOU Your journey to wellness starts here

The University of Arkansas at Pine Bluff health coverage plan promotes wellness. Annual physicals, annual OB/GYN exams and well-baby visits are covered at 100%. New employees enrolled in UAPB health coverage will be required to complete a Tobacco/Nicotine Pledge. Employees who do not complete the Tobacco/Nicotine Pledge or do not certify their enrollment in a tobacco cessation program or who elect to continue to use tobacco/nicotine will be charged a \$25 per paycheck Tobacco Surcharge, in addition to the semi-monthly premium. Nine-month appointed faculty will pay a prorated amount over nine months. All employees will recertify annually.

Nutritional Counseling

One annual visit with a dietitian and up to 3 additional visits in conjunction with health coaching for those who have a BMI of 27 or above. For 3 additional visits, prior authorization is required and continued approval contingent upon program compliance.

Real Appeal

Real Appeal is an online weight loss program available to you at no additional cost through our health benefits plan. With Real Appeal, you get a transformation coach who leads online group sessions; online tools to help track your food, activity, and weight loss progress; and a success kit with recipes, scales, workout DVDs and more shipped right to your door. Get started today at <u>www.enroll.realappeal.com</u>. Have your health insurance ID card accessible during enrollment. Bariatric Surgical Procedures

Bariatric Surgical Procedures are covered if you have a body mass index of 40 without co-morbidity or BMI of 35 or greater with obesity-related co-morbid medical conditions including hypertension, cardiopulmonary condition, sleep apnea, diabetes, or any life-threatening or serious medical condition that is weight induced. You must demonstrate that dietary attempts at weight control have been ineffective through completion of a structured diet program such as Weight Watchers or Jenny Craig; and within the 12-month period immediately prior to the request for the surgical treatment have completed a structured physician-supervised diet program of no less than six months duration and including all the following: documentation in the medical record of participation by the physician, no weight gain during the program, behavior modification supervised by a qualified professional, consultation with and participation in a reduced-calorie diet program supervised by a dietician or nutritionist, and exercise regimen (unless contraindicated). Completion of a psychological examination of the member's readiness and fitness for surgery and the necessary postoperative lifestyle changes must also be completed. Facilities for procedures are restricted to accreditation under ACS, ASMBS and MBSAQIP. No experimental or investigational procedures will be covered. Procedures are limited to one procedure and one revision per lifetime. Cosmetic procedures are not included. Patients must be 18 years of age or older. See the plan document for more information.

Disease Management

- **The Smoking Cessation Program** provides free PCP visits and \$0.00 copayments for Chantix, a medication for nicotine addiction.
- By participating in the Pregnancy Management Program, you'll receive a \$300 discount off of hospital expenses if you enroll in the 1st trimester or \$150 if you enroll in your 2nd trimester. For more information, call UMR at 1-888-438-6105
- The Metabolic Weight Loss programs can qualify you for up to a \$1,000/lifetime benefit for individuals with a BMI of 30 and above who participate in coaching. Prior authorization is required. Call UMR at 888-438-6105 for more information.

Health Plan Premiums- Monthly Medical Rates

Salary Tiers	Class	ic Plan	Health Sa	vings Plan	Premier	r Plan	
Salaries \$30,000 and below	12 Month	9 Month	12 Month	9 Month	12 Month	9 Month	
Employee Only	\$140.88	\$198.88	\$72.16	\$101.88	\$408.92	\$577.30	
Employee & Spouse	\$377.30	\$532.66	\$189.70	\$267.82	\$1025.68	\$1448.02	
Employee & Child(ren)	\$272.66	\$382.94	\$145.76	\$205.78	\$772.50	\$1090.58	
Family	\$487.48	\$688.20	\$243.10	\$343.20	\$1378.68	\$1946.38	Premiums shown ar monthly.
Salaries \$30,001 -\$60,000	12 Month	9 Month	12 Month	9 Month	12 Month	9 Month	All premiums are collected semi- monthly and pre-tax
Employee Only	\$153.88	\$217.24	\$85.16	\$120.22	\$421.92	\$595.66	
Employee & Spouse	\$377.30	\$532.66	\$189.70	\$267.82	\$1025.68	\$1448.02	are collected over 1
Employee & Child(ren)	\$296.94	\$419.20	\$145.76	\$205.78	\$796.78	\$1124.86	pay periods during t months of Septemb
Family	\$502.04	\$708.76	\$257.66	\$363.76	\$1393.24	\$1966.92	thru May to prepay for the months of
Salaries \$60,001-\$90,000	12 Month	9 Month	12 Month	9 Month	12 Month	9 Month	June, July and Augu If premiums are increased in January
Employee Only	\$163.88	\$231.36	\$95.16	\$134.24	\$431.92	\$609.76	9-month employees may be subject to a
Employee & Spouse	\$397.00	\$560.48	\$209.40	\$295.62	\$1045.38	\$1475.84	adjustment to ensu
Employee & Child(ren)	\$323.94	\$443.20	\$187.74	\$265.04	\$813.78	\$1148.86	they have paid enou to cover their summ
Family	\$533.16	\$752.70	\$288.78	\$407.68	\$1424.36	\$2010.86	benefits
Salaries \$90,001 and above	12 Month	9 Month	12 Month	9 Month	12 Month	9 Month	
Employee Only	\$173.88	\$245.48	\$105.16	\$148.16	\$441.92	\$623.88	
Employee & Spouse	\$428.00	\$604.24	240.40	\$339.38	\$1076.38	\$1519.60	
Employee & Child(ren)	\$323.94	\$457.32	\$197.74	\$279.16	\$823.78	\$1162.98	
Family	\$553.16	\$780.94	\$308.78	\$435.92	\$1444.36	2039.10	

Dental Coverage

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Additional Information

Go to the Human Resources website to find the Dental Plan Summary and other additional information.

- Go to <u>https://www.uasys.edu/</u>
- Go to "Benefits"
- Click on <u>Health & Wellness</u>
 <u>– Dental</u>
- Click on <u>Dental Summary</u>
 <u>Plan Description</u>
- "Benefits"

Whom can I cover?

- Your lawful spouse
- Children from birth to the date they turn 26
- Children include biological child, legally adopted child, stepchild and eligible foster child
- Dependent Eligibility Documentation is required.

How to register for Dental Xtra

Go to Arkansas Blue Cross Blue Shield's website at <u>uasdental.blueadvantageark</u> <u>ansas.com</u> and select the "Enroll Now" button in the Dental Xtra section. You'll receive a letter telling you about the additional dental benefits you're eligible to receive. The University of Arkansas at Pine Bluff Dental Coverage plan is designed to assist you in maintaining good oral health. The plan helps you pay for basic dental exams, restorative care, cleaning services and preventive services. It also covers more intensive and specialty dental needs including fluoride treatments, extractions, oral surgery, crowns, bridges, spacers and implants. The dental plan is administered by **Arkansas Blue Cross Blue Shield** but is self-insured by the University of Arkansas.

SCHEDULE OF DENTAL SERVICES

Individual Deductible – (Basic and Major Services) \$50 Family Deductible – 2 Family Members (Basic and Major Services) \$100 Annual Maximum Payment – Per Person Per Calendar Year \$1,750 Orthodontic Lifetime Maximum – \$2,000

Benefit Period – A benefit period for each eligible participant shall mean a calendar year, the period from January 1st to December 31st of each year. Applies to Coverage A, B and C

	In Network	Out-of-Network			
TYPE A CHARGES: PREVENTIVE SERVICES (not subject to deductible)					
Exams	100%	90%			
Radiographic Images (X-rays)	100%	90%			
Fluoride Treatment	100%	90%			
Prophylaxis (cleaning)	100%	90%			
Sealants	100%	90%			
TYPE B CHARGES: BASIC REST	ORATIVE SERVIC	ES			
Fillings	80%	72%			
Extractions	80%	72%			
Surgical and Non-Surgical Periodontics	80%	72%			
Endodontics (root canals)	80%	72%			
Anesthesia	80%	72%			
TYPE C CHARGES: MAJOR RESTORATIVE SERVICES					
Inlays, Onlays, Crowns	50%	45%			
Partials and Dentures	50%	45%			
Implants	50%	45%			
ORTHODONTICE SERIVCES limited to covered persons to age 18 (not subject to deductible)					
Diagnostic, Active, Restorative Treatment	50%	40%			
DENTAL XTRA (Included)					

Two additional cleanings are covered per year (a total of four) for members with one of the following qualifying conditions: diabetes, coronary artery disease, oral cancer, Sjogren's syndrome, stroke or pregnancy. Dental Xtra benefits may not be combined by members with more than one condition.

ROLLOVER BENEFIT				
Yearly	Available Rollover amount	Accumulated		
Threshold	to use next year/beyond	Rollover		
Amount		Maximum		
\$750	\$375	\$1,500		
	Yearly Threshold Amount	Yearly Available Rollover amount Threshold to use next year/beyond Amount		

Dental Coverage

ROLLOVER BENEFIT

If no more than \$750 claims dollars are paid in a calendar year and if you have at least one dental claim for the calendar year, your calendar year coverage maximum will increase by \$375. You can stockpile \$1,500 in total rollover dollars.

CHOOSING YOUR DENTAL NETWORK

You have the freedom to choose any licensed dentist for covered services. However, it works to your advantage to choose a dentist from the Arkansas Dental Select Plus network. You'll get the deepest discounts and pay less out of pocket when you choose a dentist from the Arkansas Dental Select Plus network of providers. If you visit an out-of-network dentist, you may be required to complete forms yourself or pay a service charge to the dentist. Payment to the out-of-network dentist will be based on Arkansas Blue Cross Blue Shield fee schedule and not billed charges. You are responsible for paying 100% of any amounts over the fee schedule, plus your percentage portion of the fee schedule amount.

Monthly Dental Premiums

75%-100% Appointed	12 Mon	9 Mon
Employee Only	\$16.32	\$23.04
Employee & Spouse	\$33.66	\$47.52
Employee & Child(ren)	\$28.42	\$40.10
Emp. Spouse & Child(ren)	\$45.76	\$65.58

<u>9 Month Premiums</u>: Faculty on a 9-month appointment pay an additional premium September through May to prepay for the following summer. 9-month premiums are collected over 17 semi-monthly pay periods.



Arkansas BlueCross BlueShield

An Independent Licensee of the Blue Cross and Blue Shield Association

Find a Provider

- Visit Arkansas Blue Cross Blue Shield's website: <u>uasdental.blueadvantage</u> <u>arkansas.com</u>
- Click on <u>Search</u>
- Enter your zip code and select the number of miles you are willing to drive
- Enter name or specialty type
- Click <u>Search</u>

Vision Insurance

Vision Insurance, in partnership with **EyeMed**, is available to you through your employment with the University of Arkansas at Pine Bluff. Vision Insurance helps lower your out-of-pocket costs when getting an eye exam and purchasing glasses or contacts.

EyeMed provides primary vision care benefits including eye examinations, prescription eyewear, and contact lenses through a nationwide network of both ophthalmologists and optometrists. EyeMed contracts with both local providers and many national and regional chain locations.

Participation in Vision Insurance is required for the full calendar year; you cannot cancel coverage or delete eligible dependents during the calendar year.

	BASIC PL	AN	ENHANCE) PLAN
Co-Payments	Exam ¹	\$10	Exam ¹	\$10
Services/Frequency	Exam	1 per plan year	Exam	1 per plan year
	Frames	1 per 2 plan years	Frames	1 per plan year
	Lenses	1 per plan year	Lenses	1 per plan year
	Contact Lenses	1 per plan year	Contact Lenses	1 per plan year
<u>Benefits</u> ⁵	In-Network	Out-of-Network	In-Network	<u>Out-of-Network</u>
Frames	\$125 retail allowance ¹	Up to \$91	\$150 retail allowance ¹	Up to \$105
Contact Lens Fitting	\$25 co-pay	Up to \$40	\$25 co-pay	Up to \$40
(standard ²)				
Contact Lens Fitting	\$25 co-pay	Up to \$40	\$25 co-pay	Up to \$40
(premium ²)				
Lenses (standard) per pair:				
Single Vision	\$25 co-pay	Up to \$30	\$20 co-pay	Up to \$30
Bifocal	\$25 co-pay	Up to \$50	\$20 co-pay	Up to \$50
Trifocal	\$25 co-pay	Up to \$70	\$20 co-pay	Up to \$70
Lenticular	\$25 co-pay	Up to \$70	\$20 co-pay	Up to \$70
Progressive (standard)	\$80 co-pay	Up to \$50	\$20 co-pay	Up to \$50
Progressive (premium)	\$110-200 co-pay	Up to \$50	\$50-195 co-pay	Up to \$50
Contact Lenses ³ ⁴	\$120 retail allowance	Up to \$84	\$150 retail allowance	Up to \$105

SCHEDULE OF VISION INSURANCE BENEFITS

Co-pays apply to in-network benefits; co-pays for out-of-network visits are deducted from reimbursements.

¹Exams at Plus Providers are \$0 co-pay. Frame allowances at Plus Providers increase by \$50.

²Standard includes contact lens fit and two follow-up visits; Premium includes 10% off retail price, then apply \$40 allowance ³Conventional & Disposable (in network): \$0 copay; 15% off balance over \$120 allowance; Medically Necessary: \$0 copay; paid in full

⁴Contacts – Out of Network: Conventional/Disposable: up to \$84; Medically Necessary: up to \$210

⁵Plan allows members to receive either contacts and frames, or frames and lens services

Vision Insurance

DISCOUNT FEATURES

Participants should check the EyeMed provider directory for providers who offer discounts for additional purchases. Discounts may vary by lens type and are subject to change without notice. Discounts do not apply if prohibited by the manufacturer.

LENS OPTIONS

	In-Network	Out-of- Network
Anti-Reflective Coating – Standard	\$45	Up to \$23
Anti-Relective Coating – Premium	\$57-85	Up to \$23
Photochromic – Non-Glass	\$75	Not covered
Polycarbonate – Standard	\$40	Not Covered
Scratch Coating – Standard Plastic	\$15 b/\$0 e	Not Covered
Tint – Solid and Gradient	\$15	Not Covered
UV Treatment	\$15 b/\$0 e	Not Covered
All Other Lens Options	\$20% off retail	Not Covered

OTHER BENEFITS

- Hearing Care from Amplifon Network: Up to 64% off hearing aids; call 1.877.203.0675 for more information
- LASIK or PRK from U.S. Laser Network: 15% off retail or 5% off promo price; call 1.800.988.4221 for more information

Semi-Monthly Vision Insurance Premiums

	BAS	SIC	ENHA	NCED
	12 Mon	9 Mon*	12 Mon	9 Mon*
Employee Only	\$2.34	\$3.31	\$4.74	\$6.69
Employee &				
Spouse	\$4.65	\$6.57	\$9.37	\$13.23
Employee &				
Child(ren)	\$4.55	\$6.43	\$9.18	\$12.97
Family	\$6.92	\$9.78	\$13.96	\$19.71

<u>*9-Month Premiums:</u> Faculty on a 9-month appointment pay an additional premium September through May to prepay for the following summer, paying for 12 months (Sept-Aug) over 9 months (Sept-May).

Find a Provider

- Go to EyeMed's website at <u>www.eyemed.com</u>
- Click on Find an eye doctor
- Choose Insight network and select either Use My Location or Enter your zip code and select Search by Zip; you can also search by doctor's name or by Online providers/Lasik providers

Additional Information

Go to the Human Resources website to find additional info about Vision Insurance.

- Go to
- https://www.uasys.edu/
- Go to "Benefits"
- Click on <u>Health & Wellness -</u> <u>Vision</u>
- Click on EyeMed Vision
 Summary Plan Description

Whom can I cover?

- Your lawful spouse
- Children from birth to the date they turn 26
- Children include biological child, legally adopted child, stepchild and eligible foster child
- Dependent Eligibility Documentation is required
- •

How to use the plan -Network Provider

- Identify yourself as an EyeMed Vision participant and present your EyeMed ID card.
- The provider will call EyeMed to verify your coverage and obtain an authorization number.
- Network provider handles all claims & paperwork.





Additional Information

• Go to https://www.uasys.edu \$

- Go to "Benefits"
- Click on <u>Health &</u> <u>Wellness -Flexible</u> <u>Spending Accounts</u>
- Click on <u>Flexible Spending</u>
 <u>Accounts Summary Plan</u>
 <u>Description</u>

Important FSA Info:

- There can be no transfer of funds between accounts.
- Expenses must in incurred from the 1st day of the plan year, or your eligibility date, through December 31, or your termination date, whichever comes first.
- You must re-enroll in FSAs every year during the annual enrollment period.
- Reimbursement requests must be made no later than March 31 of the following year.
- If you use your FSA Benny Card to pay for your healthcare expenses, save your receipts. You may be required to provide documentation that it was an eligible expense.

Flexible Spending Accounts (FSA) are tax-exempt accounts that you can use to pay for eligible medical, dental, vision, prescription, and dependent daycare expenses. Your contributions to an FSA are deducted from your pay before taxes, which lowers your taxable income. You have two FSA options:

Flexible Spending Accounts

- Healthcare FSA Employees who participate in the Health Savings Plan are not eligible for the Healthcare FSA. All other benefits-eligible employees are eligible to participate in a Healthcare FSA.
- **Dependent (day) Care Account** All benefits-eligible employees are eligible to participate in the Dependent Care FSA.

You elect your contribution for the remainder of the calendar year within 31 days of your benefits-eligible appointment date and annually after that during Open Enrollment. Contributions will be deducted from your paycheck exempt from taxes. You will have access to your full Healthcare FSA annual contribution amount at any time during the year.

	Healthcare FSA	Dependent Care FSA
Eligibility	All eligible employees, excluding those participating in the Health Savings Plan	All eligible employees
2023 Contribution Maximum	\$2,850	\$5,000 (married & filing jointly or single) \$2,500 (married and filing separately)
Plan Year Rollover	Any amount between \$50 up to \$570	Unused funds are forfeited
Eligible Expenses	Medical, prescription drug, dental & vision expenses, including copays, coinsurance & deductibles	Dependent care expenses for daycare or after-school care expenses for a child under age 13, an elderly person, or a person with disabilities as long as you claim them as a dependent on your tax return. Expenses must be incurred because you & your spouse are working or looking for work.
Paying for Expenses	Pay for expenses directly with a UMR FSA debit card or receive reimbursement by submitting a reimbursement claim form & itemized receipt	Receive a reimbursement by submitting a reimbursement claim form & itemized receipt

Additional information about eligible covered services

You can get additional information from the UMR's website at <u>www.umr.com</u>. Publications 502 (Health Care Reimbursement) and 503 (Dependent Care) will provide the most detailed information and are available from <u>www.irs.gov</u>.

Health Savings Accounts (HSA)

Once you enroll in the Health Savings Plan, you will open a Health Savings Account (HSA) with Optum Bank. You'll receive a debit card to pay for your eligible health care expenses, along with detailed information about your account.

The IRS requires the following in order for you to enroll in an HSA:

- You *must be enrolled* in the Health Savings Plan.
- You can't have other health coverage that pays for out-of-pocket health care expenses before you meet your plan deductible.
- You or your spouse can't have a Healthcare FSA or Health Reimbursement Account (HRA) in the same year that you have an HSA.
- You can't be eligible for or enrolled in Medicare, covered by TRICARE, or have received Veterans Administration (VA) benefits in the three previous months.
- You can't be claimed as a dependent by someone else.

What's Right for Me – FSA versus HSA

	Healthcare FSA	HSA		
2025 Contribution Maximum*	\$3,200 pre-tax Elect contribution amount for the year. No changes allowed during the year without an	 Individual: \$4,300 pre-tax Family: \$8,550pre-tax 		
	eligible qualifying event.			
Plan Year Rollover	Any amount over \$50 up to \$570	Any amount		
Account Ownership	Accounts are owned by the University. If you leave, you can continue to use it through COBRA; once COBRA ends account balance is forfeited.	You own the account. You can take it with you if you leave the University or retire.		
Account Growth	• Your contributions	 Your contributions University contributions Transfers Interest Investment income 		
Access to Funds	Full yearly contribution any time during the plan year	Only funds deposited in the account		
Reimbursement	File eligible claims for the plan year by March 31 of the following year	HSA funds can be used to pay for any eligible services incurred after your start date		
Eligible Expenses	Copayments or deductibles, dental care, vision care, qualifying prescriptions, certain medical equipment. For a full list of qualified medical expenses, visit <u>www.irs.gov</u> .			

2023 UAPB HSA Contributions

Individual: Up to \$650
Family: Up to \$1,200
The employer contribution is pro-rated based on enrollment date.

It's Your Money

Money in your HSA is always yours – if you don't use your entire balance, it will roll over to the next year. Also, if you leave UAPB employment, you can take the account with you.

* Includes University contributions to HSA. \$1,000 additional catch-up contribution allowed on HSA if you are 55 or older.



Life insurance provides a payment to family or other beneficiaries in the event of death. Coverage is provided by **Standard Insurance Company (The Standard)**. The University of Arkansas at Pine Bluff provides <u>Basic Life</u> <u>insurance</u> to you at no cost. Participation is mandatory and your coverage is equal to one time your Annual Earnings, rounded to the next higher multiple of \$1,000, if not already a multiple of \$1,000, not to exceed \$50,000.00.

You may purchase an additional one, two, three or four times your salary (up to a maximum of \$750,000), by enrolling in the <u>Additional Life insurance</u>. You pay 100% of the cost for Additional Life Insurance. For new hire eligibility or for qualified life event changes **IF** the requested life enrollment is <u>less than</u> \$500,000 and <u>less than</u> 3x salary Evidence of Insurability (EOI) is not required.

You may purchase <u>Dependents Life Insurance</u> to cover your eligible family members. The benefit is payable to you in the event of their death. You may choose \$10,000, \$15,000 or \$20,000 coverage for your spouse. Children are covered at one-half of the elected spouse's coverage.

Whom can I cover?	Coverage	Semi-Monthly C	ost — paid wi	ith after tax dollars			
(Dependents Life)	BASIC LIFE INSURANCE	Coverage is mandato	ory & 100% pai	id by the University.			
 A person to whom you are 	ADDITIONAL LIFE	Coverage is optional	& 100% paid l	by the employee.			
 A person to whom you are legally married. Children from live birth to the date they turn 26 Disabled child (documentation required) Children include biological child, legally adopted child, stepchild, foster child, dependent grandchild if living in your home or a 	To calculate your semi- monthly premium: 1. Multiply annual salary by 1, 2, 3 or 4 (based on coverage election). Round to next \$1,000. Cap at \$750,000. 2. Divide by 1,000 3. Multiply by Age Rate	Current Age Less than 30 30 but <35 35 but < 40 40 but <45 45 but <50 50 but <55 55 but <60 60 but <65 65 but <70	12 Mon \$0.037 \$0.053 \$0.060 \$0.075 \$0.112 \$0.172 \$0.321 \$0.493 \$0.950	9 Mon \$ 0.049 \$0.071 \$0.080 \$0.100 \$0.149 \$0.231 \$0.428 \$0.657 \$1.267			
child living in your home for whom you are the court-	4. Divide by 2	70 and older	\$1.533	\$2.071			
 Dependent Verification Form required 	DEPENDENTS LIFE INSURANCE	Coverage is optional Coverage \$10,000 \$15,000 \$20,000	& 100% paid f 12 Mon \$1.43 \$2.14 \$2.85	by the employee. 9 Mon* \$2.01 \$3.01 \$4.02			
	 Reduction in coverage for Basic Life & Optional Life If you reach age 70 but not age 75, coverage reduces by 35% of pre-age 70 coverage. If you reach age 75 or more, coverage reduces by 50% of pre-age 70 coverage. Worldwide Emergency Travel Assistance is provided to you and eligible family members as part of your Basic Life Insurance. When traveling for 						
	business or pleasure, in a foreign country or 100 miles or more away f home, you can count on getting help in the event of an emergency. T not an insurance plan and will not pay bills but instead will provide yo						
18. Guide to the University of Arken	assistance. 3 Guide to the University of Arkansas at Pine Bluff Benefits						

Accidental Death and Dismemberment

(AD&D)

You may purchase Accidental Death & Dismemberment Insurance for yourself, your spouse and your eligible dependent children in the event of accidental death (full benefit) or dismemberment (partial benefit). Coverage is provided by Standard Insurance Company (The Standard). If you enroll in family coverage, your spouse is covered at 60% of your elected dollar coverage and children are covered at 20% of your elected dollar coverage up to a maximum coverage for children of \$25,000.

Coverage amounts are available in \$25,000 increments up to a maximum coverage of \$300,000.

Coverage	Semi-Mont	hly Cost – p	oaid with after tax d	lollars
	12Mon Single	<u>Family</u>	9 Mon* Single	Family
\$25,000	\$0.19	\$0.38	\$0.27	\$0.53
\$50,000	\$0.38	\$0.75	\$0.53	\$1.06
\$75,000	\$0.56	\$1.13	\$0.80	\$1.59
\$100,000	\$0.75	\$1.50	\$1.06	\$2.12
\$125,000	\$0.94	\$1.88	\$1.33	\$2.65
\$150,000	\$1.13	\$2.25	\$1.59	\$3.18
\$175.000	\$1.32	\$2.63	\$1.86	\$3.71
\$200,000	\$1.50	\$3.00	\$2.12	\$4.24
\$225,000	\$1.69	\$3.38	\$2.39	\$4.76
\$250,000	\$1.88	\$3.75	\$2.65	\$5.29
\$275,000	\$2.06	\$4.13	\$2.92	\$5.82
\$300,000	\$2.25	\$4.50	\$3.18	\$6.35

***9-Month Premiums:** Faculty on a 9-month appointment pay an additional premium September through May to prepay for the following summer.

AD&D Coverage

Loss of:	Life	100% of Principle Sum Payable
	One hand or one foot	50% of Principle Sum Payable
	Sight of one eye, speech,	50% of Principle Sum Payable
	or hearing in both ears	
	Two or more of losses listed above	100% of Principle Sum Payable
	Thumb & index finger of same hand	25% of Principle Sum Payable
	Quadriplegia	100% of Principle Sum Payable
	Hemiplegia	50% of Principle Sum Payable
	Paraplegia	75% of Principle Sum Payable

AD&D Reduction Due to Age

Coverage reduces by:

- 35% at age 70
- 55% at age 75
- 70% at age 80
- 85% at age 85.

AD&D loss must occur:

Within 365 days of the date of the accident.

Short-term Disability

Short Term Disability income will be reduced by income you receive from:

- Worker's Compensation
- Social Security Benefits
- Unemployment Benefits
- Other income benefits

You will be considered disabled if you meet the following Own Occupation definition of disability:

- Unable to perform with reasonable continuity the material duties of your own occupation; and
- Suffer a loss of at least 20% in your pre-disability earnings when working in your own occupation.

Will the Short-Term Disability plan cover preexisting conditions?

The Short-Term Disability plan does not exclude preexisting conditions from coverage. The Optional Short-Term Disability plan does have an Extended Benefit Waiting Period for enrollments more than 31 days from your benefitseligible appointment date:

- The Benefit Waiting Period is 12 months.
- After the first 12 months of coverage the Benefit Waiting Period would then become the longer of 14 days or exhaustion of accumulated leave.

Employer-Paid Basic Short-Term Disability

The university offers employer-paid Basic Short-Term Disability (STD) insurance for your **first 3 years of employment**. Coverage is provided automatically at no cost to you and is administered by Standard Insurance.

Basic STD insurance provides 60% of your pre-disability salary, up to \$45,000. Benefits commence after a 14-day absence from work following the use of all accrued leave. (You do not have to use all of your accrued leave before taking maternity leave.)

Maximum Benefit Period – You can continue to receive Short-Term Disability benefits for as long as you continue to meet the definition of disability up to a maximum of 12 weeks of Short-Term Disability benefits.

Elimination Period – You must be continuously disabled and off work for 14 days, or the exhaustion of your accumulated sick and vacation leave (whichever is greater) before you can begin receiving Short Term Disability benefits. Employees going on Short Term Disability due to childbirth will not have to exhaust their accumulated leave prior to going on Short Term Disability.

Basic	Supplemental*	Voluntary**
100% employer paid	\$0.285 per \$100 of covered annual salary	\$0.473 p \$100 of base salary

* When you are enrolled in Basic STD coverage, Supplemental STD covers 60% of the first \$4,153 of your weekly pre-disability earnings.

** Voluntary STD covers 60% of the first \$4,153 of your weekly pre-disability earnings.

Coverage	Semi-Monthly Cost – paid with after tax dollars
BASIC	
SHORT TERM	Coverage is mandatory & 100% paid by the University.
DISABILITY	

Employee-Paid Supplemental Short-Term Disability

While you have Basic STD coverage, you can elect optional, employee-paid Supplemental Short-Term Disability (STD) insurance, which provides 60% of the first \$4,153 of your weekly predisability earnings.

If you do not enroll in Supplemental STD during your new-hire enrollment period, you will be subject to an extended benefit waiting period. Review the Short- Term Disability Policy for more information.

Long-term Disability

Long Term Disability benefits assist in replacing earnings in the event of a long-term injury or illness that prevents you from working. Coverage is provided by **Standard Insurance Company (The Standard)**.

The University of Arkansas at Pine Bluff at provides **Basic Long-Term Disability** coverage to you at no cost. Participation is mandatory and your monthly benefit would be 60% of your covered salary (salary not to exceed \$20,000).

You may purchase the **Optional Long-Term Disability** plan to cover a salary in excess of \$20,000, up to a maximum covered salary of \$500,000. The maximum benefit is still 60% of the covered salary.

Coverage	Semi-Monthly Cost – paid with after tax dollars				
BASIC LTD	Coverage is mandatory & 100% paid by the University.				
	Coverage is optional & 100% paid by the employee.				
	\$0.546 per \$100.00 of covered pay				
	Formula for calculating semi-monthly cost:				
OPTIONAL LTD	12 Month	9 Month*			
OPTIONAL LTD	1. Divide annual salary by 24	1. Divide annual salary by 17			
	2. Subtract 1,666.67	2. Subtract 2,222.22			
	1. Divide by 100	3. Divide by 100			
	4. Multiply by \$0.430 for cost	4. Multiply by \$0.430 for cost			

***9-Month Premiums:** Faculty on a 9-month appointment pay an additional premium September through May to prepay for the following summer, paying for 12 months (Sept-Aug) over 9 months (Sept-May). Nine-month faculty starting after September will pay a higher premium to adequately fund the following summer.

Elimination Period – Disability income begins after 180 days from the last day worked or the end of your accumulated sick leave, whichever is later.

Maximum Benefit Period – If approved for LTD benefits, you may receive your monthly benefits for as long as you remain disabled, up to age 65. If your disability begins over age 60, you will be eligible for the following maximum benefit period:

Age at Disability	Maximum Benefit Period
61 or younger	To age 65 or for 5 years, whichever is longer
62	3 years 6 months
63	3 years
64	2 years 6 months
65	2 years
66	1 year 9 months
67	1 year 6 months
68	1 year 3 months
69+	1 year

LTD income will be reduced by the income you receive from:

- Worker's Compensation
- Unemployment
 Compensation
- Social Security Benefits
- Other income benefits

Employees who make more than \$500,000 a year will be given an opportunity at a later date to purchase a private policy to cover their salaries in excess of \$500,000.

Will the Long-Term Disability plan cover pre-existing conditions?

Any new enrollments will be subject to a 12-month preexisting condition waiting period. Any claims made during the first 12 months of coverage will be considered pre-existing if during the 3month period prior to your effective date of coverage you:

- Consulted a physician
- Received medical treatment, services or advice
- Undergone diagnostic procedures, including selfadministered procedures
- Taken prescribed drugs or medications

Critical Illness Insurance

Pays You Cash For A Qualifying Critical Illness

UHC's Critical Illness Protection Plan is designed to provide support in the event you're diagnosed with a covered critical illness.

How it worl	(S:		What	t's covered wi	ith this plan:	Earn \$50:			Wellness Benefit detai		letails:
	Healthcare Cr	itical	Base Benefit: Cancer-Invasive,		-	wellness benefit helps		*A covered spouse can also			
Illness Prote	ection Plan se	nds a	Cance	er – non-invas	sive, chronic	pay for preventive care and		earn a benefit.			
lump-sum p	ayment direc	tly to	o renal failure, coronary artery		other screenings – complete		*The benefit will only be paid				
you after yo	ur diagnosis t	:0	disease, heart attack, heart		ck, heart	at least 1 of the following		1 time per calendar year,			
help you sta	y on top of yo	our	failur	e, major orga	n failure,	tests to ea	rn \$50: Blood	test	regar	regardless of the test	
bills. There a	are no restrict	tions		ular dystroph	-	for breast	cancer, colon		perfo	rmed. The be	nefit is paid
	use the mone	-		al Benefits: Ar		cancer, my	cancer, myeloma, ovarian			dition to any o	
	 mortgage o 			al Sclerosis (Le	-	cancer, prostate cancer, or			ents you and		
	nts, groceries			se), Cerebral	• •		es; bone marr			red spouse re	ceives
	iring treatmei			sis, Diphtheria		-	east ultrasour			r the policy.	
-	et health plar	1	-	ohalitis, Multi	ple Sclerosis,		; colonoscopy			your official o	
costs, presc	-		Tube	rculosis		-	od glucose tes	st;		s plan docum	ent for
transportati	on, etc.		*For	a complete lie	t of all	-	moidoscopy;		more	IIIIO.	
				a complete lis red conditions			stool analysis aphy; pap smo				
				ient amounts,		-	lesterol test to	-			
				al plan docum			and LDL; stre				
			onnen		ients.		icycle or tread				
						thermogra	-	, ,			
United Heal	thCare Volun	tary C	ritical I	llness Semi-N	/lonthly Premi						
Option 1:	\$10,000										
		1	2M Pr	emiums				C,	9M Premiums		
Age Range	Emp Only	EE 8	& Sp	EE & Ch	Family		Emp Only	EE 8	ջ Sp	EE & Ch	Family
Under 25	\$0.70	\$1	.35	\$1.20	\$1.85		\$0.99	\$1.	.91	\$1.69	\$2.61
25-29	\$0.95	-	.85	\$1.45	\$2.35		\$1.34	\$2.		\$2.05	\$3.32
30-34	\$1.30		.50	\$1.80	\$3.00		\$1.84	\$3.		\$2.54	\$4.24
35-40	\$1.80		.55	\$2.30	\$4.05		\$2.54	\$5.		\$3.25	\$5.72
40-44	\$2.90		.80	\$3.40	\$6.30		\$4.09	\$8.		\$4.80	\$8.89
45-49	\$4.70		.65	\$5.20	\$10.15		\$6.64	-	8.62	\$7.34	\$14.33
50-54	\$6.85	-	1.35	\$7.35	\$14.85		\$9.67	\$20		\$10.38	\$20.96
55-59	\$9.40		9.90	\$9.90	\$20.40		\$13.27	\$28		\$13.98	\$28.80
60-64	\$13.35	-	3.35	\$13.85	\$28.85		\$18.85	\$40		\$19.55	\$40.73
65-69	\$19.20		9.45	\$19.70	\$39.95		\$27.11	\$55		\$27.81	\$56.40
70-74	\$13.68		5.63	\$14.18 \$10.58	\$27.13		\$19.31	\$37		\$20.01	\$38.29
75+	\$19.08	Ş34	1.53	\$19.58	\$35.03		\$26.93	Ş48	3.74	\$27.64	\$49.45
Option 2: Age Range	\$20,000 Emp Only	EE 9	& Sp	EE & Ch	Family		Emp Only	FC C	& Sp	EE & Ch	Family
Under 25	\$1.40		.70	\$2.40	\$3.70		\$1.98		.81	\$3.39	\$5.22
25-29	\$1.40		.70	\$2.40	\$4.70		\$2.68		.22	\$4.09	\$6.64
30-34	\$2.60		.00	\$3.60	\$6.00		\$3.67		.06	\$5.08	\$8.47
35-39	\$3.60		.10	\$4.60	\$8.10		\$5.08			\$6.49	\$11.44
40-44	\$5.80			\$6.80	\$12.60		\$8.19		5.38	\$9.60	\$17.79
45-49	\$9.40		9.30	\$10.40	\$20.30		\$13.27		.25	\$14.68	\$28.66
50-54	\$13.70		3.70	\$14.70	\$29.70		\$19.34		.52	\$20.75	\$41.93
55-59	\$18.80	-	9.80	\$19.80	\$40.80		\$26.54		5.19	\$27.95	\$57.60
60-64	\$26.70		5.70	\$27.70	\$57.70		\$37.69).05	\$39.11	\$81.46
	4	+			4		4	4		4	

\$78.90

\$53.25

\$69.05

\$39.40

\$28.35

\$39.15

\$79.90

\$54.25

\$70.05

\$54.21

\$38.61

\$53.86

\$111.39

\$75.18

\$97.48

\$55.62

\$40.02

\$55.27

\$112.80

\$76.59

\$98.89

\$38.40

\$27.35

\$38.15

65-69

70-74

75+

Critical Illness Insurance

UHC Accident Insurance

Accidental injuries might put a stop to your plans, but the **Accident Protection Plan** can help with the expenses from an unexpected event. If you have a covered injury that requires medical attention, like a burn, concussion or fracture, you'll receive a cash benefit to use any way you choose. Plus, there's a yearly wellness benefit of up to \$50 per year. All you need to do is complete one preventive screening or test.

What's Covered

Even with health insurance, an accidental injury can cost you thousands of dollars. Lost wages from missing work, health insurance deductibles and daily living expenses can create long-term financial problems. Accident insurance helps cover the added costs you may face following an injury.

Here is a short list of injuries and services that may qualify for a benefit payment:

- Ambulance services
- Emergency room and urgent care
- Doctor visits
- Hospital admission and stays
- Medical appliances (e.g., crutches, wheelchair, walker)
- Rehabilitation
- Burns
- Concussions
- Fractures/dislocations
- Lacerations (cuts)
- Prescriptions
- Organized sports injuries
- Lodging, travel and childcare

For a complete list of all covered conditions and benefit payment amounts, see your <u>official plan</u> <u>documents</u>.

Premiums	Option 1	Option 2	Option 3
Employee Only	\$1.91	\$2.52	\$3.33
Employee + Spouse	\$3.03	\$4.00	\$5.29
Employee + Child(ren)	\$3.53	\$4.85	\$6.57
Employee + Family	\$5.50	\$7.50	\$10.12

Critical Illness Insurance

UHC Hospital Indemnity Insurance

Even with health insurance, paying for a hospital stay can mean a lot of money coming out of your pocket to pay for your care. The **Hospital Indemnity Protection Plan** helps take care of that burden. If you receive covered hospital care, such as hospital admission and confinement or staying in the ICU, you'll receive a cash benefit to use any way you choose. Plus, there's a yearly wellness benefit of up to \$50 per year. All you need to do is complete one preventive screening or test.

Base Plan Benefits	Option I	Option 2	Option 3
Hospital/ICU Admission*	\$500	\$1,000	\$1,500
Hospital Confinement	\$100	\$150	\$200
ICU Confinement	\$100	\$150	\$200

For a complete list of all covered conditions and benefit payment amounts, see your official plan documents.

Premium						
Employee Only	\$2.87	\$4.75	\$6.63			
Employee + Spouse	\$5.67	\$9.42	\$13.15			
Employee + Child(ren)	\$4.81	\$8.17	\$11.54			
Employee + Family	\$8.08	\$13.67	\$19.26			

Additional wellness benefits may be money in your pocket.

To <u>earn \$50 each year</u>, complete at least one of these screenings or tests:

*If you are enrolled in multiple plans (Critical Illness, Accident, or Hospital Indemnity) and complete more than one of these screenings, you could receive up to \$150 in wellness benefits (\$50 for each exam up to 3 exams).

- Blood test for breast cancer (CA 15-3)
- Blood test for colon cancer (CEA)
- Blood test for myeloma (serum protein electrophoresis)
- Blood test for ovarian cancer (CA 125)
- Blood test for prostate cancer (PSA)
- Blood test for triglycerides
- Bone marrow testing
- Breast ultrasound
- Chest X-ray
- Colonoscopy
- Fasting blood glucose test
- Flexible sigmoidoscopy
- Hemoccult stool analysis
- Mammography
- Pap smear
- Serum cholesterol test to determine HDL and LDL levels
- Stress test on a bicycle or treadmill
- Thermography
- Virtual colonoscopy

Voluntary Benefits

Voluntary products are private, individual policies you can purchase directly through the carrier or payroll deduction. The University offers four different voluntary products: **Group Rated Auto/Home Insurance**, **Pre-Paid Legal**, and **Identity Theft**. You may keep the Voluntary Products when you leave University of Arkansas employment by continuing to pay the premium directly to the vendor. All enrollment, questions and claims go directly through the provider, not through Human Resources.

Info	Group Rated Auto/Home - Farmers	Pre-Paid Legal – LegalShield	Identity Theft - ID Watchdog	
Benefit	You have access to auto and home insurance from Farmers Group Select. Take advantage of special discounts and benefits that could save you hundreds. *no payroll deduction	Gives you access to attorneys who can provide advice or assistance on a variety of legal issues.	Identity theft is the fastest growing crime in the US. The average victim will spend \$9,650 and 330 hours trying to resolve problems. ID Watchdog offers complete identity theft protection.	
Plan Features	 Up to 15% off the cost of your coverage. Automatic payment discount Good driving rewards A loyalty discount for years of service Multi-policy discounts Multi-vehicle savings 24/7 superior service 	 Membership includes: Personal legal advice on unlimited issues Letters/calls made in your behalf Contracts & documents reviewed Will, Living Will & Health Care Power of Attorney Moving traffic violations IRS Audit Assistance Trial Defense (If named as defendant in a covered civil action). Uncontested divorce, separation, adoption &/or name change More 24/7 Emergency Access 	ID Watchdog searches billions of data points & alerts you of any changes to your credit, financial transactions, personal information, and more. Additional benefits include social networks alerts, sex offender notifications, and a password manager. ID Watchdog offers a 24/7 Customer Care Center and fully managed resolution services.	
Steps to enroll	Contact Farmers at 1-800-438-6381 or online at: <u>www.myautohome.far</u> <u>mers.com/</u>	Website: www.legalshield.com/ info/uas For questions, contact Stephanie Walker at 870- 295-0417.	Call 1-866-513-1518 or go to: http://identitybenefits.uas	

Life Changes & E Your Benefits Coverage

You have 31-days from your benefits-eligible appointment date to enroll in coverage. If you don't enroll in coverage during this period, you may need a qualifying event to enroll. You may also need a qualifying event to enroll dependents later. Cancelling coverage or deleting dependents may also require a qualifying event. Remember, all changes must be made with 31 days of the qualifying event and documentation of the qualifying event is required. See below for options for enrolling or changing your elections later.

	Enroll in Coverage	Cancel Coverage	Change Coverage
Health, Dental & Vision	 Can enroll in coverage with a HIPAA Qualifying event: Loss of eligibility for other coverage Employer contributions for other coverage cease Marriage Birth or adoption 	 <u>Tax-exempt Premiums</u> - must have a qualifying event: Marriage, birth or adoption Divorce or annulment Spouse beginning or ending employment Employee or spouse employment changes: part- time to full-time or full-time to part-time or going on or off LWOP. 	 Can add dependents with HIPAA Qualifying event: Loss of eligibility for other coverage Employer contributions for other coverage cease Marriage or divorce Death of spouse Birth or adoption Delete dependents (Tax-exempt Premiums) - must have a qualifying event: Marriage, birth, adoption, divorce Spouse or child terminates employment Employee or spouse employment changes: part-time to full-time or full-time to part-time or goes on or off LWOP.
Optional & Dependent Life	Must complete Evidence of Insurability requirements. Subject to plan approval.	Can cancel coverage at any time without a qualifying event	To Increase coverage must complete Evidence of Insurability requirements. Subject to plan approval. Can reduce coverage at any time.
Optional Disability	Can enroll in Opt STD at any time. LTD only during new hire or open enrollment period. STD subject to Extended Waiting Period & LTD will exclude pre-existing conditions for 1 st 12 months	Can cancel coverage at any time.	N/A
AD&D Flexible Spending (All changes must be consistent with your QE, as determined by the administrator)	Can enroll at any time. Health & Dependent Care: • Marriage or divorce • Birth or adoption • Death of spouse Dependent Care Only: • Spouse terminates employment • Employee or spouse employment changes: part-time to full-time or full-time to part-time or goes on or off LWOP.	 Can cancel coverage at any time. Health & Dependent Care: Marriage or divorce Birth or adoption Death of spouse Dependent Care Only Spouse terminates employment Employee or spouse employment changes: part-time to full-time or full-time to part-time or on/off LWOP. 	 Can change coverage at any time. Health & Dependent Care: Marriage or divorce Birth or adoption Death of spouse Dependent Care Only Spouse terminates employment Employee or spouse employment changes: part-time to full-time or full-time to part-time or goes on or off LWOP.

Additional Information

Coordinating Family Coverage: Employees whose spouses or children are also UA employees must carefully coordinate their benefits enrollment. You cannot be covered as both an employee and the dependent of an employee. Children cannot be covered under both parent's plans.

Keep Your Coverage Current: Remember, it is your responsibility to add new dependents (through marriage, birth, or adoption) to your insurance plans within 31 days of the date of your qualifying event. It is equally important that you delete dependents who become ineligible for coverage (through divorce, children turning 26).

Benefits Resources

Benefits Area	Provider	Online	Phone
Retirement	TIAA 730 Third Ave New York, NY 10017 Fidelity P.O. Box 770002	www.tiaa.org/uasys/ www.fidelity.com/uark	1-800-842-2252 1-800-343-0860
Health Plan	Cincinnati, OH 45277 UMR 115 W Wausau Ave Wausau, WI 54402	www.umr.com	1-888-438-6105
Prescription Drug Plan	MedImpact 10680 Treena St 5 th Floor San Diego, CA 92131	https://mp.medimpact.com/uas	1-800-788-2949
Dental Plan	Arkansas BCBS P.O. Box 2181 Little Rock, AR 72203	uasdental.blueadvantagearkansas.com	1-844-662-2281
Vision Insurance	EyeMed	www.eyemed.com	1-866-800-5457
Flexible Spending Accounts	UMR P.O. Box 8022 Wausau, WI 54402	www.umr.com	1-866-868-0145
Life, Disability & AD&D Insurance	The Standard 920 SW Sixth Ave Portland OR, 97204	www.standard.com	1-888-641-7194
Critical Illness Insurance	United Healthcare		1-800-444-5854 option 1
Group Rated Auto/Home	Farmers	www.myautohome.farmers.com/	1-800-438-6381
Pre-Paid Legal	LegalShield	www.legalshield.com/info/uas	1-870-295-0417
Identity Theft Protection	ID Watchdog	www.idwatchdog.com	1-866-513-1518
Employee Assistance Program	UAMS	www.uams.edu/eap/	1-800-542-6021

Resources

Other Campus Resources

Other Campus Resources	Discussion			The standard standards
Services	Phone	Address	Web Address	Email address
Human Resources Benefits Retirement Insurance Retiree Benefits Leave Benefits – Catastrophic Leave, FMLA, LWOP	575-8863 or 8402	ADMN 205	https://www.uapb.edu/administration /finance_administration/human_resou rces/benefits.aspx	hrbenf@uapb.edu williamssm@uapb.e du hunterc@uapb.edu
Class/Comp Classification/Compensation Employment 	575-8408	ADMN 205	https://www.uapb.edu/administration /finance_administration/human_resou rces.aspx	<u>smithld@uapb.edu</u> <u>hickmanc@uapb.ed</u> <u>U</u>
Employee Services Employee Relations 	575-8405	ADMN 205	https://www.uapb.edu/administration/fin ance_administration/human_resources. aspx	<u>hickmanc@uapb,ed</u> <u>U</u>
 Payroll Supplemental Pay & LWOP Deducts Payroll Adjustments & Accounting Miscellaneous Deducts (voluntary & involuntary) Employment Verification 	575-8403 or 8406	ADMN 103	https://www.uapb.edu/administration/fin ance administration/human resources. aspx https://www.uapb.edu/administration /finance_administration/human_resou rces/benefits.aspx	blaked@uapb.edu mccoya@uapb.edu payrolloffice@uapb. edu
Talent Development Training & Development Workday Security Access 	575-8405	ADMN 205	https://www.uapb.edu/administration/fin ance_administration/human_resources. aspx	<u>hickmanc@uapb.ed</u> <u>u</u>
Services				
Environmental Health & Safety	575-8958	FAMA	https://www.uapb.edu/administration/fin ance administration/facilities managem ent.aspx	finleye@uapb.edu
Facilities Management	575-8831	FAMA	https://www.uapb.edu/administration/fin ance administration/facilities managem ent.aspx	langleyt@uapb.edu
Health Center	575-7107	INFIRMARY	https://www.uapb.edu/administration/stu dent affairs/health services.aspx	holmesb@uapb.edu
Human Resources	575-8400	ADMN 222	https://www.uapb.edu/administration/fin ance administration/human resources. aspx	<u>williamssm@uapb.e</u> <u>du</u>
ID Card Office	575-8104	POLICE HEADQUARTER	https://www.uapb.edu/administration/stu dent affairs/police and public safety.a spx	ferrellll@uapb.edu
Mailing Services	575-7158 or 7159	MAIL CENTER		dockettd@uapb.edu
Parking & Transit	575-8104	POLICE HEADQUARTER	https://www.uapb.edu/administration/stu dent_affairs/police_and_public_safety.a spx	ferrellll@uapb.edu
Telephone Services	575- 4773	ADM BO01	techservices@uapb.edu	ttechservices@uapb .edu
Treasurer's Office	575-8866	ADMN 1		<u>chilkdsa@uapb.edu</u>
UAPB Account Username	575-2905	ADM BO01	techservices@uapb.edu	techservices@uapb. edu
AM&N/UAPB Federal Credit Union	575-2173	1410 University Drive	https://uapbfcu.virtualcu.net/	uapbfcu@sbcgobal. net
Watson Memorial Library	575-4525	Library	https://www.uapb.edu/administration/ac ademic_affairs/john_brown_watson_me morial_library.aspx	<u>donaldsonm@uapb.</u> <u>edu</u>
University IT Services	575-4773	ADMBO01	techservices@uapb.edu	techservice@uapb.e du
U of A Police Department	575-8102	POLICE HEADQUARTER	https://www.uapb.edu/administration/stu dent affairs/police and public safety.a spx	allenIm@uapb.edu
Arkansas Employee Assistance Program	800-542-6021		www.uams.edu/eap	<u>hunterc@uapb.edu</u>
Office of Equal Opportunity and Compliance	575-8053	Delta, Room 112	titlix@uapb.edu	davistn@uapb.edu
Workday training, support and help	575-8402	ADM 205		<u>williamssm@uapb.e</u> <u>du</u>
Miscellaneous				
Cafeteria (Meal Plans)	575-8954	Davis Sut. Union	https://uapb.campusdish.com/ https://www.bkstr.com/arkansasatpinebl	
Follett Bookstore Athletics Ticket Sales	575-8856 575-8601	Davis Stu. Union Stadium	uffstore https://uapblionsroar.com/	jonesbk@uapb.edu
	373-0001	StauluIII	1111/2017/10151041.0011/	Jonesok(@uapp.euu

Resources



Workday is a self-service site that allows employees to view their personal payroll, benefits and leave information.

From Workday you can:

- Enroll in, update, or view your UA Benefits (insurance and retirement)
- View, print or email earning statements
- View, print or email leave reports
- View, print or email hourly time sheets
- Create or update direct deposit information
- Update home or campus address and phone
- Update W4 information

To log on to Workday employees must have a UARK email and password.



Annual Leave

Twelve-month benefit-eligible employees will earn annual leave based on the following schedule. If the position's FLSA status is exempt, you will accrue 15 hours of annual leave per month if the position's FLSA status is non-exempt will accrue according to years of service.

Beginning	Through	Monthly	Annually
1 st year	3 rd year	8 hours	12 days
4 th year	5 th year	10 hours	15 days
6 th year	12 th year	12 hours	18 days
13 th year	20 th year	14 hours	21 days
21 st year		15 hours	22.5 days

Benefits-eligible non-classified staff who are on a 12-month position and are 100% appointed will accrue 15 hours of annual leave a month or 22.5 days a year. Individuals on a 9-month or 10-month appointment do not earn annual leave.

Sick Leave

Benefits-eligible employees who are 100% appointed will accrue 8 hours of sick leave a month. Employees who are 50%-99% appointed will accrue sick leave on a prorated basis based on their percentage of appointments.

Additional Information To log in to Workday go to: http://myapps.microsoft.com/

- *_login with your institution credentials for Office 365 (you may be prompted to authenticate via Multi-Factor Authentication or set up MFA if you have not done so previously)
- * locate and click the 'Workday' icon from the available applications list
- *you will automatically be logged into Workday

The maximum annual leave that can be transferred to a new calendar year or paid out at termination is 240 hours.

Prior State Service

If you have worked for another Arkansas state agency or state-supported institution of higher education in an eligible position, you may be given credit for your years of full-time service. Complete the "Prior Service Notification & Authorization" form.

The maximum sick leave

that can be transferred to a new calendar year is 960 hours.



You must be in a paid

status (not on leave without pay except for FMLA, Worker's Compensation) on your normally scheduled work day before the holiday and after the holiday to be eligible for the paid holiday.

Holidays in Workday

Holidays are loaded for you into Workday during the month in which the holidays occur. If you end up working the holiday, you will need to make an adjustment to your holiday entry and the remaining hours will be moved to annual leave at the end of the month.

Holidays

(())

There are ordinarily twelve official paid holidays and one or two additional days when the University is closed and which are charged to your annual leave. The usual schedule includes the following holidays:

- Independence Day (July 4)
- Labor Day (first Monday in September)
- Thanksgiving Day (4th Thursday in November)
- Day after Thanksgiving* (Friday after the 4th Thursday in November) **If approved by Governor.*
- Christmas Eve (December 24)
- Christmas Day (December 25)
- Christmas Holiday (In lieu of Veteran's Day)
- Christmas Holiday (In lieu of employee's birthday)
- Christmas Holiday (1-6 days charged to annual leave as needed)
- New Year's Day (January 1)
- Dr. Martin Luther King's Birthday (4th Monday in January)
- Friday of Spring Break
- Memorial Day

When a holiday (except December 25) falls on a Saturday, the preceding Friday is observed; when December 25 falls on a Saturday the following Monday is observed. When a holiday (except December 24) falls on a Sunday, the following Monday is observed.



Eligibility

All full-time (100% appointed) active benefits-eligible employees, their spouses, and their eligible dependent children (as defined by the Internal Revenue Service) are eligible for a reduction in tuition. Employees cannot be on leave without pay other than workers' compensation, military or family medical leave. Eligibility begins with the final day of regular registration following continuous employment in a full-time position with the University for one complete fall or spring semester.

Employee Discount

UAPB employees who begin taking classes, resume taking classes, or begin a new degree program after May 1, 2017, will receive a 50% reduction in, but will be limited to no more than 132 discounted credit hours for undergraduate classes and no more than 72 discounted credit hours for graduate classes. All discounts from previous enrollment are applicable to the 132 undergraduate and 72 graduate benefit hours cap. Eligible employees can receive a 50% discount for undergraduate courses only taken at any other University of Arkansas campus, up to 132 credit hours.

Dependent Discount

Spouses and eligible dependent children will receive a 50% discount for undergraduate classes only, up to 132 credit hours. Spouses and eligible dependent children can receive a 40% discount in undergraduate classes (limited to 132 credit hours) at any other campus of the University of Arkansas.

Exclusions & Limitations:

- Employee discount applies to Resident Tuition and miscellaneous student fees only; no discount for college, course, or distance education fees. Fees for credit classes only, audited classes on a space available basis only.
- Spouse/dependent discount applies to Resident Tuition only. No student fees are waived.
- Payroll deduction available for the remaining balance after the discount is applied.
- Tuition discount does not apply to Law School, Medical School or self-paced courses.
- Total employee enrollment at reduced rates shall not exceed 11 semester credit hours per fall and spring semester and a total of 6 semester credit hours during the summer terms.
- Employees can request supervisor approval for up to five hours of release time to attend one class per semester during working hours. Additional classes taken during regular working hours must be made up with flex time or annual leave.

Is this benefit taxable?

Per IRS Code section 127, if your employer pays more than \$5,250 for educational benefits for you during the calendar year, you must pay tax on the amount over \$5,250. Any amount over \$5,250 per calendar year will be taxed by the University.

Dependent Eligibility

The dependent student must be your lawful spouse or a dependent child as defined by the IRS. A dependent child per the IRS is a full-time student under the age of 24 at the end of the year or the student is permanently or totally disabled. You may be requested to furnish documentation to confirm your dependent's eligibility.

Waivers:

A new waiver is required for each fall, spring and summer semester.

Arkansas Employee Assistance Program

Contact the EAP at: 1-479-973-9072 1-501-686-2588 1-800-542-6021 www.uams.edu/eap

The EAP is not involved in grievance or disciplinary problems and is not designed to replace any Human Resources or management procedures. The EAP does not provide long-term psychotherapy or court-ordered treatment.

Retiree Health Insurance

- Retirees not Medicare eligible will be in the same plan as active employees.
- Retirees Medicare eligible will participate in the UA United Healthcare Medicare Advantage Plan.
- Retirees Medicare eligible must be enrolled in Medicare Parts A & B.
- Retirees pay 100% of the premium.

Eligibility for Retiree ID

- Age 65 or older with 5 continuous years of service,
- Age 62 or older with 10 continuous years of service,
- Any age with 20 years of continuous service.

Benefits-eligible University employees and their eligible family members have access to an Employee Assistance Program (EAP). Your privacy is protected by state and federal law and professional standards of confidentiality. Any records or notes remain within the EAP and are not part of your personnel file or medical records.

The University of Arkansas at Pine Bluff pays the entire cost of this program. If you are referred by the EAP to a community resource in a specialized area and you choose to participate in this program, you will be responsible for the costs.

The EAP is a good place to start when you are facing problems. Your first appointment provides an opportunity for you and the EAP consultant to identify the problem by working together to begin to outline solutions. The EAP provides counseling, information and referrals for employees in the areas of:

- Stress Management
- Relationships
- Grief/bereavement
- Substance abuse
- Life balance

- Elder care
- Personal/emotional concerns
- Compassion fatigue
- Work-related issues
- Anger management

The EAP helps supervisors, managers and employees troubleshoot problems and provides training and educational programs to improve the overall health and wellness of the organization.

Steps to Retirement

Step 1	Step 2	Step 3	Step 4	Step 5
Consult with TIAA/Fidelity	Consult with the Benefits Office	Determine your Eligibility	Submit Benefits Forms	Enjoy your retiree benefits

To qualify to purchase retiree insurance, employees must meet, at the time they leave University employment, one of two retiree insurance eligibility criteria:

- 10-70-10 Rule Has been employed by the UAPB for 10 consecutive years in a benefits-eligible position, has a combination of age and years of service totaling 70 and has participated in the applicable insurance plan for 10 consecutive years, all immediately prior to retirement. Retirees who meet these criteria can keep health, dental, and vision insurance.
- 5-65-5 Rule Has been employed by the UA for 5 consecutive years in a benefits-eligible position, is age 65 or older at the time of retirement and has participated in the applicable insurance plan for 5 continuous years, all immediately prior to retirement. Retirees who meet these criteria can keep health, dental, and vision insurance.