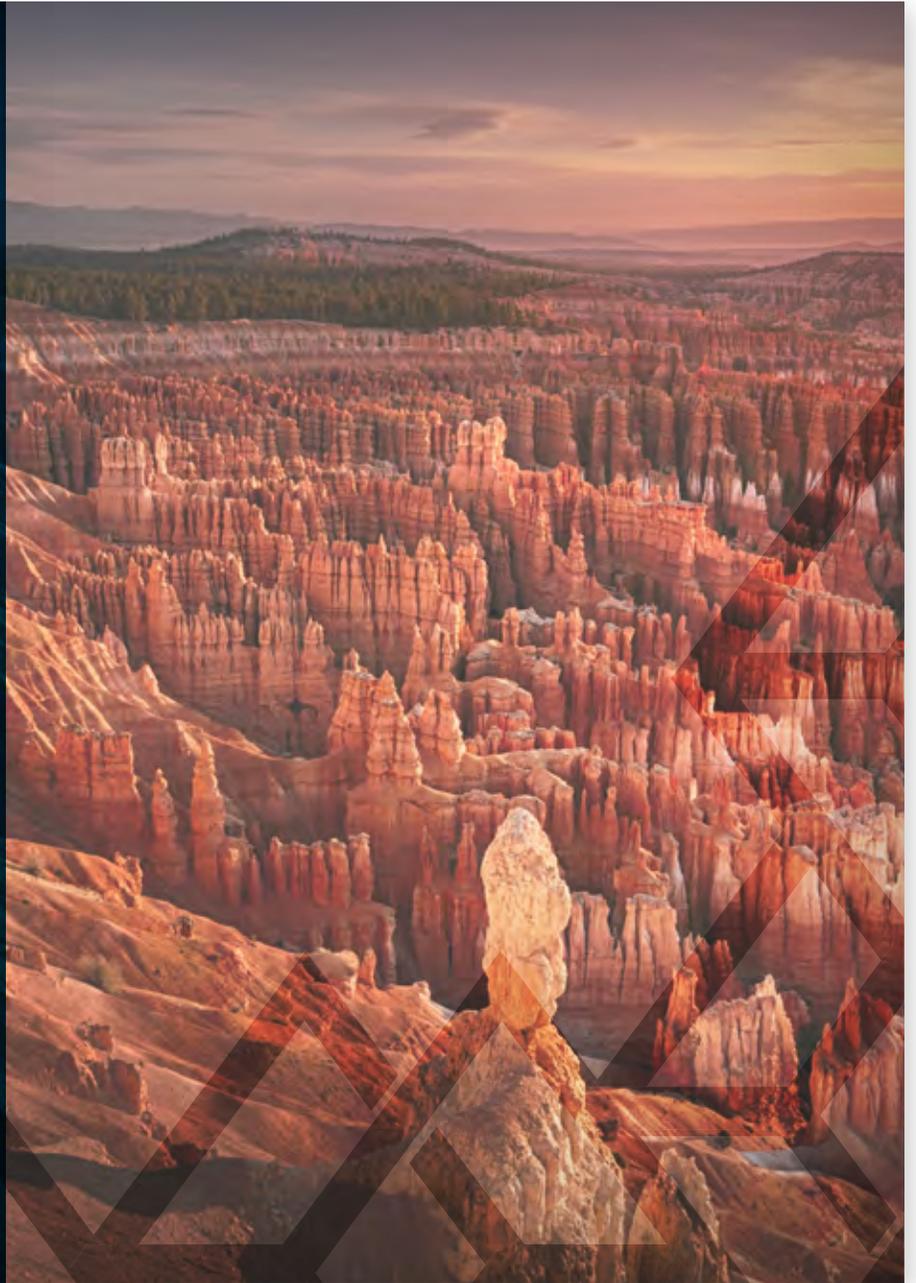


# Employee Benefits



Southern Utah University

July 1, 2021 - June 30, 2022

Provided by:  
 **MORETON & COMPANY**

# Employee Benefits: 2021-2022

## Benefit Carrier Contact Information

Southern Utah University  
**Lori Ann Barnson, Benefits Manager**  
435-586-7819

loriannbarnson@suu.edu

UMR - Medical  
Plan Advisor: 800-207-3172

Group #: 76-414958  
www.umar.com

WellVia - TeleHealth  
877-872-0370

www.WellViaSolutions.com

EMI Health - Dental & Vision  
800-662-5850

Group #: 144  
www.emihealth.com

Optum Health Bank - Health Savings Account (Card)  
800-791-9361

www.optumbank.com

MotivRx - Pharmacy  
385-247-1030

www.MotivRx.com

National Benefit Services - HRA & Reimbursement Accounts  
800-274-0503 / 801-532-4000  
www.nbsbenefits.com

Fax: 800-478-1528 / 801-355-0928

The Standard - Life & Disability  
800-368-7056

Group #: 136251-B  
www.standard.com

The Life Connection (TLC) - Employee Assistance Program  
800-280-3782  
www.bhoptions.com

Code #: SUU

AFLAC - Worksite Products  
800-433-3035

www.aflacgroupinsurance.com

Moreton & Company - Account Manager / Claims Assistance  
**Patty Nichols**

801-715-7052  
Toll Free: 800-594-8949

pnichols@moreton.com  
www.moreton.com

## Welcome!

To learn more about the benefits Southern Utah University offers, please review the following 2021-2022 benefit materials. If you have any questions about your benefits, we are here to help!

## Human Resources

Please contact Human Resources for any benefits related questions, including benefit coverage, contributions, enrollment, benefit change forms, notification for changes in status, provider directories, and general carrier information.

## Social Security Numbers

Federal law requires you to provide a valid Social Security number for each person to be covered by any medical plan sponsored by your employer (yourself, your spouse, and all dependent children).

## Medicare Part D

If you have Medicare or will become eligible for Medicare in the next 12 months, federal law gives you more choices about your prescription drug coverage. See Human Resources for more information.

## HIPAA Privacy Notice

The Health Insurance Portability and Accountability Act (HIPAA) requires employers to adhere to strict privacy guidelines and establishes employees' rights with regard to their personal health information. If you have any questions regarding HIPAA, please speak with your Moreton & Company representative or contact Human Resources.

**Note:** This publication is only a partial summary of benefits and is provided for informational purposes only. It does not describe all elements of the summarized programs. For complete information regarding the benefits, plan provisions, limitations and exclusions, and for a description of claims procedures, refer to the formal benefit documents that will be provided to you after enrollment. In the event of a discrepancy or conflict between the information contained in this publication and the official benefit plan provisions, the official plan documents and insurance contracts will govern. Copies of these documents are available for your review from your Human Resources department. No rights shall accrue to you and/or your dependents because of any statement, error, or omission in this publication.

## IRS Regulations

**Failure to meet IRS deadlines will affect your insurance coverage!** IRS regulations govern how and when an employee may make cafeteria plan elections and changes to those elections. These rules require that employers enforce firm deadlines with respect to employee benefit enrollment and related cafeteria plan elections. This means that we cannot accept forms after open enrollment ends. Furthermore, if you experience a qualifying event allowing you to add, drop, or modify your coverage and related cafeteria plan election mid-year, we must be timely notified of such event. The required forms generally must be completed within 30 days of such event, or you cannot make the change. In addition, please be aware that with the exception of the birth, adoption, or placement for adoption of a child, any cafeteria plan election changes can only be implemented prospectively, meaning on the first paycheck or period of coverage following our receipt of the form. Therefore, if you are making a change based on a qualifying event other than a new child, and you want changes implemented as of the date of the event, you must inform us of the change in advance. **If you do not enroll on time, you will not receive coverage or be able to change your elections mid-year unless you have an IRS qualifying event.**

# Enrollment Guidelines: 2021-2022

## Why is open enrollment so important?

Benefits open enrollment for Southern Utah University is held each year. Employees should understand that the pre-tax payment for applicable benefits is done through the Cafeteria plan and, as noted above, under IRS regulations elections cannot be revoked or changed during the plan year. **Once the enrollment period has ended, employees may not make or change benefit elections unless they experience a qualifying event.** Employees must notify Human Resources of any change of status as soon as possible, but generally within **30 days** after the event.

## Who is eligible to participate in the benefit plans?

- Employees in a benefit eligible position who work 20+ hours per week;
- Employees' legally married spouse, and/or dependent(s), (dependents are generally children who are less than 26 years of age); see your Benefits Summary's definition of legally married spouse and/or dependent(s);

## When do benefits begin?

- Eligible employees can receive benefits on date of hire. Life and Disability coverage begins first of the month following date hire. (provided forms are properly submitted);
- Employees hired after the plan year begins will select their coverage choices for the remainder of that plan year at the time of eligibility. All the necessary enrollment and change forms are available through the Human Resources department.

## Is it possible to make changes during the year?

After the enrollment deadline, your election is generally irrevocable, meaning you cannot add, modify, or drop coverage for the plan year. You may have a special enrollment right allowing coverage changes for certain losses of coverage eligibility under another plan, or if you gain a new spouse or dependent. You also may be entitled, or required, to change your election if you, your spouse, or dependents experience one of the qualifying change events listed in the next section. However, you must contact Human Resources to determine if your plan and circumstances allow such a change. If so, you must complete and return a change form to Human Resources generally within 30 days.

## Qualifying Changes: (30 Days Unless Otherwise Stated Below)

- Marriage, divorce, or legal separation;
- Change in number of dependents (e.g., Birth or adoption of a child or another change in the number of dependents);
- Change in employment status of employee, spouse, or dependent that causes loss of eligibility;
- Dependent ceases to satisfy eligibility requirements;
- Change in residence that causes loss of eligibility;
- Significant changes in company benefit plan(s), including cost change, significant coverage curtailment, additional or significant improvement of company offered benefits;
- Change in coverage under another employer plan (including mandatory or optional change initiated by your spouse's employer or a change initiated by your spouse);
- Loss of coverage from government plans/programs or educational institution;
- COBRA qualifying event (termination/reduction of hours, employee death, divorce/legal separation, ceasing to be a dependent);
- Other changes resulting from a judgment, decree, or order;
- Medicare or Medicaid entitlement;
- FMLA leave of absence;
- Loss or gain of CHIP or Medicaid subsidy eligibility (60 Days)

## Glossary of Terms

**Co-pay:** Typically refers to a fixed dollar amount a member must pay for a particular service (such as a physician visit or ER visit).

**Deductible:** Amount that must be paid by the member before an insurance carrier will pay a claim; benefits offered after deductible are indicated with AD.

**Coinurance:** Typically refers to a member's share of covered costs after any deductible has been satisfied.

**Out of Pocket Maximum (OOPM):** The maximum amount members pay for covered network essential health benefit expenses during the benefit year, including co-pays, coinsurance, and deductibles.

**PPO (Preferred Provider Organization):** This type of plan utilizes both network and non-network benefits.

**Network (In-Network):** Providers who have agreed to accept contracted rates from an insurance carrier.

**Non-Network (Out of Network):** Any non-contracted providers. The services from these providers are subject to balance billing, meaning members can be billed for the difference between the insurance carrier's fee schedule and the billed charges.

**Health Maintenance Organization (HMO):** This plan covers in-network providers and services only; it does not cover any out of network services.

# Medical Plans: 2021-2022

Southern Utah University offers the following medical plan through UMR:

Southern Utah University QHDHP			
	Participating Provider Tier 1	Participating Provider Tier 2	Non-Participating Provider Tier 3 *
Deductible PCY	\$1,400 Individual / \$2,800 Family	\$1,750 Individual / \$3,500 Family	\$3,500 Individual / \$7,000 Family
	If more than one person in a family is covered under the policy, the individual deductible does NOT apply. Instead, the Family Deductible applies and no medical expenses (other than covered preventive care) will be paid by the plan until the Family Deductible is met.		
Out of Pocket Maximum (Includes Most Services)	\$1,400 Individual / \$2,800 Family	\$3,000 Individual / \$6,000 Family	\$6,000 Individual / \$12,000 Family
	If more than one person in a family is covered under the policy, the Individual Out of Pocket Maximum does NOT apply. Instead, the Family Out of Pocket Maximum applies and you will pay the applicable co-pay or coinsurance (other than covered preventive care) until the Family Out of Pocket Maximum is met.		
Coinsurance (Carrier Pays / Member Pays)	NA	80% / 20% AD	60% / 40% AD
Office Visits			
Primary Care	\$0.00 AD	\$35 AD	60 / 40 AD
Preventive **	Covered 100%	Covered 100%	60 / 40 AD
Specialists or Secondary Care Provider	\$0.00 AD	\$45 AD	60 / 40 AD
Chiropractic	NA	\$45 AD	60 / 40 AD
Telehealth - WellVia	NA	\$0.00	Not Covered
Diagnostic Lab & X-Ray Services			
Minor (In Office)	\$0.00 AD	80 / 20 AD	60 / 40 AD
Major	\$0.00 AD	80 / 20 AD	60 / 40 AD
Pediatric Services (Through age 18)			
Routine Eye Exam (1 Per Policy Year)	NA	Covered 100%	60 / 40 AD
Hospital Services			
Outpatient	\$0.00 AD	80 / 20 AD	60 / 40 AD
Inpatient	\$0.00 AD	80 / 20 AD	60 / 40 AD
Maternity	NA	80 / 20 AD	60 / 40 AD
Emergency Services			
Urgent Care	NA	80 / 20 AD	60 / 40 AD
Emergency Room	NA	\$300 AD	See Network Benefits
Ambulance	NA	80 / 20 AD	See Network Benefits
Mental Health Services			
Inpatient	NA	80 / 20 AD	60 / 40 AD
Outpatient	NA	80 / 20 AD	60 / 40 AD
Outpatient - Office	NA	\$45 AD	60 / 40 AD
Prescriptions (Generic Required)		<b>Tier 1 / Tier 2 / Tier 3 / Tier 4</b>	
Pharmacy	NA	\$10 / 30% (\$250 Max.) / 50% (\$350 Max.) / Up to 40% (\$400 Max.)	Not Covered
Maintenance Drugs or Mail Order	NA	\$20 / 30% (\$250 Max.) / 50% (\$350 Max.) / Up to 40% (\$400 Max.)	Not Covered

Southern Utah University QHDHP Employee Per Pay Period Rates		
Coverage Type	Employee	Employer
Employee (EE)	\$28.50	\$238.75
Family	\$80.50	\$691.75

**AD:** After Deductible

**PCY:** Per Calendar Year

\* Member will be responsible for amounts billed by non-participating providers in excess of eligible medical expense amount.

\*\* Please refer to your provided UMR materials for a full list of covered preventive services and limitations.

**Please Note:** Some benefits require pre-authorization and/or limitations may apply. Please refer to your provided UMR materials for additional information.

To find a provider or for a complete description of benefits, limitations, and exclusions, consult your benefits summary, available from Human Resources or at [www.UMR.com](http://www.UMR.com).

# Medical Plans: 2021-2022

Southern Utah University offers the following medical plan through UMR:

Southern Utah University Traditional			
	Participating Provider Tier 1	Participating Provider Tier 2	Non-Participating Provider Tier 3 *
Deductible PCY	\$1,000 Individual / \$1,500 Family	\$1,000 Individual / \$1,500 Family	\$1,500 Individual / \$3,000 Family
If any family member reaches the Individual Deductible then the deductible is satisfied for that family member. If any combination of family members reach the Family Deductible, then the deductible is satisfied for the entire family.			
Out of Pocket Maximum (Includes Most Services)	\$2,500 Individual / \$5,000 Family	\$3,500 Individual / \$7,000 Family	\$7,000 Individual / \$14,000 Family
If any family member reaches the Individual Out of Pocket Maximum, then the out of pocket maximum is satisfied for that family member. If any combination of family members reach the Family Out of Pocket Maximum, then the out of pocket maximum is satisfied for the entire family.			
Coinsurance (Carrier Pays / Member Pays)	NA	80% / 20% AD	60% / 40% AD
Office Visits			
Primary Care	\$15 Co-pay	\$35 Co-pay	60 / 40 AD
Preventive **	Covered 100%	Covered 100%	60 / 40 AD
Specialists or Secondary Care Provider	\$20 Co-pay	\$45 Co-pay	60 / 40 AD
Chiropractic	NA	\$45 Co-pay	60 / 40 AD
Telehealth - WellVia	NA	\$0.00	Not Covered
Diagnostic Lab & X-Ray Services			
Minor (In Office)	90 / 10 AD	80 / 20 AD	60 / 40 AD
Major	90 / 10 AD	80 / 20 AD	60 / 40 AD
Pediatric Services (Through age 18)			
Routine Eye Exam (1 Per Policy Year)	NA	Covered 100%	60 / 40 AD
Hospital Services			
Outpatient	90 / 10 AD	80 / 20 AD	60 / 40 AD
Inpatient	90 / 10 AD	80 / 20 AD	60 / 40 AD
Maternity	NA	80 / 20 AD	60 / 40 AD
Emergency Services			
Urgent Care	NA	\$45 Co-pay	60 / 40 AD
Emergency Room	NA	\$300 Co-pay	See Network Benefits
Ambulance	NA	80 / 20 AD	See Network Benefits
Mental Health Services			
Inpatient	NA	80 / 20 AD	60 / 40 AD
Outpatient	NA	80 / 20 AD	60 / 40 AD
Outpatient - Office	NA	\$45 Co-pay	60 / 40 AD
Prescriptions (Generic Required)		<b>Tier 1 / Tier 2 / Tier 3 / Tier 4</b>	
Deductible (Separate)	NA	\$50 Single / \$150 Family	Not Covered
Pharmacy	NA	\$10 / 30% (\$250 Max.) / 50% (\$350 Max.) / Up to 40% (\$400 Max.)	Not Covered
Maintenance Drugs or Mail Order	NA	\$20 / 30% (\$250 Max.) / 50% (\$350 Max.) / Up to 40% (\$400 Max.)	Not Covered

Southern Utah University Traditional Employee Per Pay Period Rates		
Coverage Type	Employee	Employer
Employee (EE)	\$67.50	\$238.75
Two Party	\$153.00	\$537.00
Family	\$220.00	\$770.00

AD: After Deductible

PCY: Per Calendar Year

\* Member will be responsible for amounts billed by non-participating providers in excess of eligible medical expense amount.

\*\* Please refer to your provided UMR materials for a full list of covered preventive services and limitations.

Please Note: Some benefits require pre-authorization and/or limitations may apply. Please refer to your provided UMR materials for additional information.

To find a provider or for a complete description of benefits, limitations, and exclusions, consult your benefits summary, available from Human Resources or at [www.UMR.com](http://www.UMR.com).

The benefits illustrated are in summary form only. They should not be construed as complete in and of themselves. They are only for comparison. In the case of a discrepancy, the plan documents apply. Please refer to the formal plan documents for a complete description of benefits, limitations, and exclusions.

# Telemedicine: 2021-2022

WellVia Telephone Doctor Access - 100% Company Paid

Speak with a doctor 24 hours a day, 7 days a week, 365 days a year.

WellVia gives you access to a doctor over the phone anytime, anywhere.

- A majority of all doctor visits can be handled over the phone using WellVia.
- Several urgent care visits can be managed using TeleHealth

Use WellVia for common conditions:

- Acid Reflux
- Asthma
- Cold and Flu
- Diabetes
- Headache
- High Blood Pressure
- Sinus Conditions
- Sore Throat
- Many Other Conditions

Get Medications Prescribed:

- Albuteral
- Allegra
- Flonase
- Ibuprofen 800mg
- Levaquin
- Lipitor
- Metaform
- Nasonex
- Many Other Medications

Trust Our Physician Network:

- U.S. Based and Licensed
- Primary Care, Pediatricians, and Board-Certified Specialists
- Average 10 Years of Experience
- Supported by Internal, Bilingual Patient Care Center
- Specialists in Communicating and Diagnosing via Telehealth

WellVia doesn't replace your primary care physician. It is a convenient, alternative way for you to get the care you need that will save you time and money. Whether it's the middle of the night, while you're on vacation, on a business trip, or that moment when you run out of a prescription, WellVia is on call.

Speak with a doctor anytime and pay no consultation fee.

Online: [WellViaSolutions.com](https://www.wellviasolutions.com) Or  
Patient Care Center: 1-877-872-0370

# Health Savings Account (HSA): 2021-2022

## What is a Health Savings Account (HSA)?

A Health Savings Account (HSA) is a tax advantaged account that can be used to pay eligible medical expenses not covered by an insurance plan including deductibles and coinsurance. You can either fund your HSA with post-tax payments and receive a deduction on your tax return, or you can fund your HSA with pre-tax dollars. In addition, your employer makes a contribution to your HSA as shown below.

## Who is eligible for a Health Savings Account?

Anyone who satisfies all of the following:

- Covered by a Qualified High Deductible Health Plan (QHDHP);
- Not covered under another health plan;
- Not enrolled in Medicare A or Medicare B benefits; and,
- Not eligible to be claimed on another person's tax return.

## What is a deductible?

It is a set dollar amount, determined by your plan, that you must pay out of pocket or from your HSA account before insurance coverage for medical expenses can begin.

## What is the difference between an HSA and Flexible Spending Account (FSA)?

- An HSA can rollover unused funds from year to year indefinitely.
- FSA contribution limits are lower than for HSAs. In addition, not all FSAs have a rollover feature, and those that do can only rollover a limited amount.

## When do I use my HSA?

After visiting a physician, facility, or pharmacy, request that they submit your claim to your Medical Carrier for payment. You should make sure that your provider has your most up-to-date insurance information. Once the claim has been processed, any out of pocket expenses will be billed. At this time you may choose the following options:

- Use your HSA debit card or HSA check to pay for any out of pocket expenses.
- Write a personal check, receiving reimbursement at a later date.
- Save your HSA dollars for future medical expenses.

You should always ask that your claim be submitted to the health plan before you seek reimbursement from your HSA. This procedure will ensure that provider discounts are applied. **Also, remember to keep all medical receipts and Explanation of Benefits (EOBs) to support your personal tax record. You should keep these records for at least four years.**

## How does a Health Savings Account Work?



## How is an HSA used to pay for medical care?

1. Employee and/or employer funds an HSA account.
2. Employee seeks medical services.
3. A bill for medical services is submitted as a claim to your insurance carrier and paid in part according to your HDHP, subject to a deductible and coinsurance.\*
4. Employee can pay the remaining amount with a debit card or check from their HSA account.
5. This process is repeated until the out of pocket maximum is reached, after which the employee generally should be covered for almost all network eligible expenses.

\* Subject to plan design, check your Benefits Summary. Preventive care may be covered at 100%.

## How much can be contributed to an HSA?

As mandated by federal law, the Annual Contribution limits are:

Type of Coverage	2021 Maximum Annual Contribution
Individual	\$3,600
Two Party	\$7,200
Family	\$7,200

Individuals age 55 or older may be eligible to make a catch up contribution of \$1,000 in 2021.

## Does my employer contribute to my HSA?

Southern Utah University has elected to contribute the following amounts. These amounts apply towards your Annual Maximum Contribution:

Type of Coverage	2021 Employer Semi-Monthly Contribution
Individual	\$21.40
Family	\$60.40

## Can I contribute to both an HSA and FSA in the same year?

You **may not** contribute to or use a general purpose health FSA and an HSA. However, contributions to a Limited Purpose FSA, which only allows reimbursement of certain expenses that are not eligible for payment under the High Deductible Health Plan (HDHP), are permissible. The Limited Purpose FSA allows HSA-covered employees to pay for dental and vision expenses that are not covered by insurance. However, it **does not** allow you to pay for other medical expenses, until you have reached your HDHP medical deductible. Your employer **HAS NOT** established a limited FSA to allow employees to contribute pre-tax dollars to an account.

## What if I am a new hire or have a special enrollment and enroll in an HSA in the middle of a year?

If you enroll in an HSA and corresponding HDHP at any time other than the start of the calendar year, so long as you enroll by December 1, you may still contribute the maximum amount allowed for the calendar year (see the chart on the previous page). However, the IRS requires you to participate in the HDHP during a subsequent testing period (generally through the end of the following year). Failure to do so will result in adverse tax consequences.

## Why should I elect an HSA?

- Cost Savings
- Tax Benefits:
  - HSA contributions are excluded from federal income tax.
  - Interest earnings may be tax free.
  - Withdrawals for eligible expenses are exempt from federal income tax.
- You generally pay a lower plan premium for a HDHP than a traditional indemnity plan.
- Unused money is held in interest-bearing savings or investment accounts from year to year.

**Note:** Many states have passed legislation to provide favorable state tax treatment for HSAs. However, in a small number of states, amounts contributed to HSAs and interest earned on HSA accounts could be included in the employee's compensation for state income tax purposes.

## Long-Term Financial Benefits

- Save for future medical expenses, including retiree medical
- Funds roll over year to year
- This is your account - you take it with you. If you leave your employer you can do the following:
  - Leave your funds in your current HSA account;
  - Transfer your funds to an HSA with your new employer; or
  - Transfer your funds to another qualifying account within 60 days.

## Choice

- You control and manage your health care expenses.
- You choose when to use your HSA dollars to pay your health care expenses.
- You choose when to save your HSA dollars and pay health care expenses out of pocket.
- You can choose to increase or decrease your election during the year.

## Can I use my HSA dollars for non-eligible expenses?

Money withdrawn from an HSA account to reimburse non-eligible expenses is taxable income to the account holder and is subject to a tax penalty. If the account holder is over age 65 OR disabled, the distribution amount (if for a non-eligible expense) is still considered taxable income; however, the tax penalty IS waived.

## When can I start using my HSA dollars?

You can use your HSA dollars for any qualifying expense incurred after your HSA account activation and once contributions have been made.

## Can my HSA dollars be used for retirement health care costs?

Yes, for expenses eligible for reimbursement, and Medicare and other health coverage premiums after age 65.

## Can I use the money in my account to pay for my dependents' medical expenses?

Yes, you can use the money in the account to pay for medical expenses of yourself, your spouse, or your dependent children. You can pay for expenses of your spouse and dependent children even if they are not covered by your HDHP.

# Health Reimbursement Arrangements (HRA): 2021-2022

NBS July 1, 2021 through June 30, 2022

Southern Utah University, has established a Health Reimbursement Arrangement "HRA Plan" to help you pay for your out-of-pocket medical expenses. The Plan is funded by Employer Contributions. No Employee Salary Deductions are allowed in this plan. If you received a reimbursement for an expense under the Plan, you cannot claim a Federal income tax credit or deduction on your return.

## When am I eligible to participate?

You must be enrolled in our group Qualifying High Deductible Health plan (QHDHP) or provide a signed statement that you are covered under a Qualifying High Deductible Health plan (QHDHP) in order to participate. Employees must provide proof that they are ineligible for the HSA in order to enroll in the HRA.

## Benefit

SUU shall make available to each Participant an Employer Contribution for the reimbursement of Qualifying Expenses. SUU will contribute a discretionary amount per pay period the amount will be determined at the beginning of each plan year.

**For the 2021 Plan year SUU will contribute:**

**Single Participant:** \$21.40 per pay period.

**2-Party and Family:** \$60.40 per pay period.

If the maximum Employer Contribution is not used in its entirety, unused amounts from prior Coverage Periods will be carried over to future Coverage Periods.

All Contributions will be pro-rated based on the Employee's eligibility date to join the plan.

## Qualified Expenses

The plan allows you to be reimbursed for certain out-of-pocket medical, dental and vision expenses which are incurred by you and your dependents. These would include drugs obtained through a prescription. The expenses, which qualify, are those permitted by Section 213 of the Internal Revenue Code. A list of some of the expenses that qualify is available from NBS.

## How Do I Recieved Reimbursements

During the course of the Coverage Period, you may submit requests for reimbursement of expenses you have incurred. NBS will provide you with acceptable forms for submitting these requests for reimbursement. In addition, you must submit to NBS proof of the expenses you have incurred and that they have not been paid by any other health plan coverage. If the request qualifies as a benefit or expense that the Plan has agreed to pay, you will receive a reimbursement payment soon thereafter. Remember, reimbursements made from the Plan are generally not subject to federal income tax or withholding. Nor are they subject to Social Security taxes. Expenses are considered "incurred" when the service is performed, not necessarily when it is paid for. You can get a claim form at [www.participant.nbsbenefits.com](http://www.participant.nbsbenefits.com) for reimbursement.

## NBS Flexcard – FSA Pre-paid MasterCard

SUU may sponsor the use of the NBS Flexcard, making access to your flex dollars easier than ever. You may use the card to pay merchants or service providers that accept credit cards, so there is no need to pay cash up front then wait for reimbursement.

Terminated Employees can submit receipts for services, 30 days after their termination date and then a run out of 30 days after the end of the grace period. Any unused funds will be forfeited back to the company.

## General Plan Information

Coverage Period End: **June 30th**

Grace Period (for 2021): **12 Months**

Run-out Period: **30 Days**

# Reimbursement Accounts: 2021-2022

NBS July 1, 2021 through June 30, 2022

Reimbursement accounts enable you to pay certain qualified expenses using tax-free dollars. Depending on your personal tax rate, this can save you 10-30% or more on medical, dental, vision, and/or dependent care out of pocket costs.

The following accounts may be available to you:

## Flexible Spending Account (FSA)

This account allows you to set aside up to \$2,750 in pretax dollars to pay most out of pocket medical, dental, or vision care expenses, including: medical and dental deductibles and co-payments, eye glasses, dental, and orthodontic work not covered by insurance.

## Dependent Care Assistance Plan (DCAP)

This account lets you set aside up to \$5,000 in pre-tax dollars to pay for eligible dependent care expenses so you (and, if married, your spouse) can work.

## The Advantages

There are some significant advantages to using the above reimbursement type accounts. Income directed to a reimbursement account is tax free. When you pay less in taxes, you receive more spendable income. These accounts can save you 10-30% or more, depending on your personal tax rate. Convenient payroll deductions help assure that you will have money available for out of pocket health and/or dependent care expenses.

## How It Works

During annual enrollment, you decide how much you want to deposit into your reimbursement account(s). That amount is deducted evenly during the calendar year from your paycheck before taxes are taken out. When you have an expense that qualifies, you pay the bill, submit a claim, and you are reimbursed with tax-free dollars from your account.

## Eligibility

You will be eligible to participate in the account(s) on the first day of the month following your date of hire. The following are additional guidelines for determining eligible expenses

- Expenses are for services received during the calendar year (Jul. 1 to Jun. 31).
- Expenses are not covered by any health care plan in which you are enrolled.
- The IRS would otherwise let you deduct the expenses from your income taxes.

## The Dependent Care Assistance Plan

With the Dependent Care account you can set aside tax-free income to pay for qualified dependent care expenses, such as day care, that you normally pay with after-tax dollars. You must meet the following criteria in order to set up this account:

- You and your spouse both work;
- You are a single head of household; or
- Your spouse is disabled or a full-time student

Qualified dependents include children under 13 and/or dependents who are physically or mentally handicapped and the expense must be incurred to allow you to work. If your spouse is unemployed or doing volunteer work you cannot set up a reimbursement account. Each calendar year the IRS allows you to contribute the following amounts, depending on your family status:

- If you are single, the lesser of your earned income or \$5,000
- If you are married, you can contribute the lowest of:
  - Your (or your spouse's) earned income
  - \$5,000 if filing jointly, or \$2,500 if filing separately

## Use it or Lose it

If you don't use all of the pre-taxed dollars you deposited into your FSA and/or DCAP, you will forfeit any balance in the account(s) at the end of the plan year. You have 60 days following the end of the plan year to submit claims incurred during the plan year. You have 12 months after the plan year ends to incur expenses covered by your FSA. You have an additional 90 days to submit claims for reimbursement.

## Once Enrolled, You May Not Change

Once you have designated how much you want to contribute on an annual basis to one or both of your reimbursement accounts, you cannot stop or change your contributions unless you have a Qualifying Change Event as defined and limited by the IRS. See Qualifying Change rules earlier in this guide.

## Reimbursements

To claim reimbursements, fill out a claim form and attach any supporting information. For healthcare, this will include receipts showing the amount you paid and the date(s) on which you or a dependent received services. For dependent care, this may include any contracts, letters, or receipts. You may send this information to NBS via email, fax, or standard mail.

Email: [claims@NBSbenefits.com](mailto:claims@NBSbenefits.com)

Fax: 801-355-0928

Mailing Address: National Benefit Services, LLC P.O. Box 6980,  
West Jordan, UT 84084

# Dental Plan: 2021-2022

Southern Utah University offers the following dental plan through EMI Health:

Premier PPO		
	Network	Non-Network *
Deductible PPY	\$0.00	
Maximum Annual Benefit - <i>Dental</i>	\$2,000 Per Individual	
Coinsurance	Carrier Pays / Member Pays - See Amounts Below	
Preventive & Diagnostic Services Exams, Cleanings, Fluoride, X-Rays	No Waiting Period	
	Covered 100%	100% Covered up to TOA
Basic Services Fillings, Non-Surgical Extractions	No Waiting Period	
	80 / 20	80 / 20 up to TOA
Major Services Bridges, Crowns, Oral Surgery	No Waiting Period	
	50 / 50	50 / 50 up to TOA
Endodontic & Periodontic Services	Covered under Basic Services	
Maximum Lifetime Benefit - <i>Orthodontia</i>	\$1,500 Per Individual	
Orthodontic Services Dependents Age 7 to 19 Adults	No Waiting Period	
	50 / 50 50 / 50	50 / 50 50 / 50

Premier PPO Employee Per Pay Period Rates		
Coverage Type	Employee	Employer
Employee (EE)	\$3.50	\$13.40
Two Party	\$6.40	\$23.60
Family	\$11.80	\$43.90

**AD:** After Deductible

**TOA:** Table of Allowance

\* Member will be responsible for amounts billed by non-participating providers in excess of eligible dental expense amount.

For a complete description of benefits, limitations, and exclusions, consult your benefits summary available from Human Resources or at [www.emihealth.com](http://www.emihealth.com).

## Vision Plan: 2021-2022

Southern Utah University offers the following vision plan through EMI Health:

Vision 130B		
	Network (Member Pays)	Non-Network (Reimbursement)
Eye Exam	No Benefit	
Frames	Once Every 12 Months	
Allowance Based on Retail Pricing	\$130 Allowance	Up to \$90
Lenses	Once Every 12 Months	
Single Vision	\$10 Co-pay	Up to \$85 for Lenses, Options, and Coatings
Bifocal	\$10 Co-pay	
Trifocal	\$10 Co-pay	
Standard Progressive	\$50 Co-pay	
Premium Progressive	No Discount	
Lens Options		Up to \$85 for Lenses, Options, and Coatings
Tint (Solid or Gradient)	Up to 25% Discount	
UV Coating	\$10 Co-pay	
Standard Scratch Resistance	\$10 Co-pay	
Standard Polycarbonate	Up to 25% Discount	
Standard Anti-Reflective	Up to 25% Discount	
Other Add-ons and Services	Up to 25% Discount	
Contacts (In Lieu of Glasses)	Once Every 12 Months	
Conventional	\$130 Allowance	Up to \$90
LASIK or PRK		
Retail Pricing	\$250 off per eye	Not Covered
Coverage Type	Vision 130B Employee Per Pay Period Rates	
Employee (EE)	\$2.05	
Two Party	\$3.95	
Family	\$6.30	

For a complete description of benefits, limitations, and exclusions, consult your benefits summary, available from Human Resources or at [www.emihealth.com](http://www.emihealth.com).

# Life Insurance Plans: 2021-2022

## The Standard Basic Life, AD&D - 50% Company Paid

Each eligible employee can receive basic life insurance for themselves and their eligible dependents. Please note that some coverage is subject to a benefit reduction schedule starting at age 65, see Human Resources if you have any questions regarding the age reduction schedule. AD&D benefits match this reduction schedule. Life and AD&D benefits terminate upon retirement. Basic Term Life insurance includes waiver of premium coverage. The waiver of premium does not apply to any AD&D benefits.

Benefits	
Employee Life Insurance	2× Salary up to \$400,000
Accidental Death & Dismemberment (AD&D) - <b>Employee Only</b>	2× Salary up to \$400,000
Seatbelt Benefit - <b>Employee Only</b> (Paid for a death resulting from an auto accident while properly wearing a seatbelt.)	\$10,000
Spouse Life Insurance	\$10,000
Child(ren) Life Insurance - Live birth to age 26	\$10,000

Please see Certificate of Coverage summary for more detailed benefit information.

## Voluntary Supplemental Life, AD&D - 100% Employee Paid

Supplemental group term life insurance is available on a voluntary basis. This coverage is in addition to the company provided amounts and the premiums are 100% employee paid through payroll deduction. Coverage is available only to employees eligible for benefits and covered under the basic group term life insurance provided by Southern Utah University.

Employees may select a maximum of \$500,000 in coverage in increments of \$10,000. Spouse coverage may be equal to but not exceed 100% of the Employee's Supplemental Coverage amount up to \$100,000 in increments of \$10,000. Unmarried, dependent children under the age of 26 are eligible for \$10,000 of coverage.

All supplemental insurance amounts can be purchased at any time and are subject to evidence of insurability. Each applicant must complete a Group Life Health Form. Insurance will become effective on the first of the month following underwriting approval by The Standard. Please note that some coverage is subject to a benefit reduction schedule starting at age 65, see Human Resources if you have any questions regarding the age reduction schedule. Benefits terminate upon retirement. Supplemental life offers a Right of Conversion. Enrollment forms are available from Human Resources.

Please see Certificate of Coverage summary for more detailed benefit information.

Monthly Voluntary Supplemental Life Rates Per \$1,000 of Coverage		
Age	Employee	* Spouse
Under 24	\$0.070	\$0.070
25 to 29	\$0.080	\$0.080
30 to 34	\$0.100	\$0.100
35 to 39	\$0.110	\$0.110
40 to 44	\$0.120	\$0.120
45 to 49	\$0.170	\$0.170
50 to 54	\$0.250	\$0.250
55 to 59	\$0.450	\$0.450
60 to 64	\$0.680	\$0.680
65 to 69	\$1.290	\$1.290
70 to 74	\$2.080	\$2.080
75 & Over	\$2.080	\$2.080
Monthly Dependent Life	\$1.00 per \$5,000 of coverage (Rate is fixed - Regardless of number of children)	

Supplemental Life Guaranteed Issue (Guaranteed Issue Applies to New Eligible Employees Only)	
Employee	\$250,000
Spouse	\$50,000
Dependent Child(ren)	\$10,000

\* Spouse rates are based on employee's age.

### Estimated Premium Calculations

$\frac{\text{Desired Amount of Employee Coverage}}{\div 1,000} =$	$\times$	$\frac{\text{Rate from Table}}{\text{Number of 1,000's}}$	$=$	$\times 12 =$	$\div 26 =$	$\frac{\text{Estimated Premium Per Pay Period}^{**}}{\text{Number of Pay Periods}}$
$\frac{\text{Desired Amount of Spouse Coverage}}{\div 1,000} =$	$\times$	$\frac{\text{Rate from Table}}{\text{Number of 1,000's}}$	$=$	$\times 12 =$	$\div 26 =$	$\frac{\text{Estimated Premium Per Pay Period}^{**}}{\text{Number of Pay Periods}}$

\*\* The premiums calculated are estimates ONLY. Please refer to your The Standard plan documents for full premium breakdowns.

# Disability Insurance Plan: 2021-2022

## The Standard Voluntary Long-Term Disability

Employee Paid for 2 years, then Employer Paid

Long Term Disability (LTD) insurance replaces a percentage of your income on a monthly basis in the event that you are unable to work due to an accident or illness. Please see Certificate of Coverage summary, provided by The Standard, for more detailed benefit information.

Benefits	
Monthly Benefit	66.67% of Monthly Salary up to \$6,000 per Month
Maximum Benefit Period	Social Security Normal Retirement Age (SSNRA). Aviation Instructors have a 12 Month Maximum Benefit Period.
Elimination Period	180 Days
Definition of Disability	Unable to perform one or more of the main duties of his or her own occupation.
Mental & Nervous / Substance Abuse	24 Months Lifetime
Definition of Earnings	Base Salary Only (Overtime, Bonuses, and Commissions are excluded.)
Pre-Existing Condition Restrictions	3 Months on Plan / 12 Months Look-back

### Estimated Premium Calculations

$$\frac{\text{Monthly Salary}}{\text{Benefit}} \times .06667 = \frac{\text{Benefit}}{\text{Rate from Table}} \times \$0.33 = \frac{\text{Rate from Table}}{\text{Estimated Premium Per Pay Period}^*} \div 100 =$$

\* The premiums calculated are estimates ONLY. Please refer to your The Standard plan documents for full premium breakdowns.

Rates Per \$100 of Coverage	
Age	Monthly Rate
Composite	\$0.33

# Employee Assistance Program: 2021-2022

The Life Connection (TLC) - 100% Company Paid

## What is an Employee Assistance Program (EAP)?

An Employee Assistance Program provides short-term, confidential counseling for you and anyone living in your household regardless of whether you and/or they are covered under your health insurance plan at no out of pocket expense to you.

## Is it Confidential?

Yes, all discussions between you and the EAP counselor are confidential. Personal information is never shared with anyone (including Southern Utah University) at any time without your direct knowledge and approval. Exceptions are made only in cases governed by law to protect individuals threatened by violence.

Employee Assistance Program counselors are experienced, caring professionals who hold a Master's degree in counseling or a related field. They are certified or licensed by the appropriate state agency.

Counselors use a solution-focused therapy model and teach you how to resolve your unique problem while providing caring support along the way.

The entire cost of EAP services is covered in a monthly fee paid by Southern Utah University. All EAP services are free to you with no co-pay or deductible required.

Each household member is entitled to 6 face-to-face visits and unlimited number of phone calls per incident, per household member. Should you elect to receive mental health services through your medical benefit, The Life Connection (TLC) will not absorb the cost.

## How do I make an Appointment?

Setting up an appointment is as simple as calling the office. You will be offered an appointment time, generally within a couple of working days of your initial call. No paperwork or approval is needed and there is no charge. Counselors are available around the clock for emergency and crisis situations.

Seeking help early minimizes the chances of problems escalating and requiring more extensive services. Often, a few visits with a counselor are all you need to gain perspective and regain a sense of control over your life.

Call 1-800-280-3782

Code SUU

### To reach an EAP Representative

Call 1-800-280-3782

All services are free and accessible  
**24 hours a day, 365 days a year.**

The EAP is your resource for everything from the everyday to the unexpected.

At times, we can all use help with a personal problem or issue that is interfering with our life or work. Most people experience personal or family challenges in the course of their lives. Our professional counselors are available to discuss the issues you face in your life, including:

Life Changes	Legal Advice
Birth/Adoption	Finances
Child Care	Elder Care
Parenting	Relationships
Family Conflicts	Grief
Stress	Aging
Depression	Drugs/Alcohol
Job Pressures	Eating Disorders

# Worksite Products: 2021-2022

## Aflac - 100% Employee Paid

These benefits generally are NOT sponsored or endorsed by your employer, including for purposes of federal and state law, so federal ERISA law is inapplicable.

### Get the Aflacts

1. Aflac is different from health insurance; it's insurance for daily living.  
Major medical pays for doctors, hospitals, and prescriptions. Aflac is insurance for daily living. It pays cash benefits directly to you, unless otherwise assigned, to help with daily expenses due to an illness or accident.
2. Aflac is an extra measure of financial protection.  
When you're sick or hurt, Aflac pays cash benefits directly to you to help you and your family with unexpected expenses. The benefits are predetermined and paid regardless of any other insurance you have.
3. Aflac pays you cash benefits to use as you see fit.  
You can use your Aflac benefits check to help pay for groceries, childcare, or rent. It's totally up to you.
4. Aflac benefits help with unexpected expenses.  
Your Aflac benefits check helps you pay for the many out of pocket expenses you incur when you are sick or hurt - like the cost of transportation to and from medical facilities, parking, and additional childcare expenses.
5. Aflac belongs to you, not your company.  
When you have an Aflac policy-it's yours. You own it. Even if you change jobs or retire, you can take your Aflac policy with you, with no increase in premiums.
6. Aflac is affordable.  
We have a range of products that can fit most budgets. Aflac can help provide you and your family with coverage and security to help maintain your everyday life in case of illness or injury. And, Aflac rates don't go up even when you file a claim.
7. Aflac processes claims quickly-usually within 4 days.  
Aflac provides prompt service and fast payment of accepted claims to help you pay your bills. While you're focusing on your health, we focus on getting you cash as quickly as possible.
8. Aflac claims are easy to file.  
When you're sick or hurt, the last thing you need is a complicated form to fill out. Aflac benefits are easy to understand, and our forms are easy to complete.
9. Aflac pays you benefits even when you're healthy.  
We want you to be healthy-that's why we promote preventative care. Get a routine physical, a mammogram, or an eye exam and we'll pay you. It's that simple.
10. We have a spokes-duck.  
Ducks make a variety of unique sounds. However, our spokes-duck only makes one sound in many different ways. Also, most company spokespersons don't have wings. Ours does. And we've got you under them.
11. Voluntary coverages that are available include; Accident, Short-Term Disability, Cancer Coverage, and Critical Care. More information about these plans can be found at: <https://www.aflac.com/prospecting/default.aspx>

### Lane Morgan

Email: [lane\\_morgan@us.aflac.com](mailto:lane_morgan@us.aflac.com)

Phone: 435-668-2626

### Change Forms and Benefits Info Can Be Found at:

<https://www.suu.edu/hr/benefits/>

# Retirement: 2021-2022

## URS/Fidelity/TIAA Retirement - 100% University Paid

Retirement Benefits	Contacts
<b>URS</b> Classified employees are able to participate in Utah Retirement System (URS) Classified staff will receive 10% funding into a hybrid pension and a 401(k) or as defined contribution into 401(k) only. Once pension is funded, the balance of 10% will be contributed to the 401(k). Employees must elect hybrid or DC in their first year.	URS 800-950-4877
<b>Fidelity</b> Professional staff and faculty will receive a 14.2% contribution into in the 401(a) Defined Contribution Retirement Plan with either Fidelity, TIAA or a combination of both. You may choose how your funds are invested and change your investment options at any time through the Investment Providers' websites or customer service departments. This is an employer contribution only plan, so all funds contributed come from the University. Vesting for the 401(a) is 100% on day one. Vesting is your ownership in your retirement plan. While many employers require you to work a set number of years for them before you own all your funds, SUU gives you a 100% ownership on day one.	Fidelity Investments 800-343-0860
<b>TIAA</b> Professional staff and faculty will receive a 14.2% contribution into in the 401(a) Defined Contribution Retirement Plan with either Fidelity, TIAA or a combination of both. You may choose how your funds are invested and change your investment options at any time through the Investment Providers' websites or customer service departments. This is an employer contribution only plan, so all funds contributed come from the University. Vesting for the 401(a) is 100% on day one. Vesting is your ownership in your retirement plan. While many employers require you to work a set number of years for them before you own all your funds, SUU gives you a 100% ownership on day one	TIAA 800-842-2776

### Retirement Frequently Asked Questions

Q. If I change employee classifications, can I change my retirement election?

In compliance with IRS 4.72.2 Cash or Deferred Arrangements (CODA), once an employee is enrolled with a retirement program, they must stay with the retirement program throughout their employment with the company. When a person leaves SUU employment and returns, regardless of classification, the employee will return to the original retirement election.

Q. Where do I change my allocations?

You must contact your retirement company directly to make any changes to where your contributions are allocated.  
**URS** (1-800-365-8772), **TIAA** (1-800-842-2776), **Fidelity** (1-800-343-0860)

Q. How often can I change the amount I contribute to my retirement plan?

You may change your contributions to your retirement plan at any time by filling out a Salary Reduction/Deduction Agreement and submitting it to the Human Resources Office. URS contributions are changed by logging into the employee portal on URS.org. All contribution changes to your retirement plan are effective the following pay period.

Q. When do I become vested?

All participant's contributions are immediately vested. Contributions by the University for non-classified employees (including faculty members) are immediately vested. URS contributions are vested at the earliest of 4 years of service for the defined benefit and immediately vested for the 401(k) defined contribution.

Q. How do I choose which vendor is best for me? Who do I talk to about helping me choose the right investments for me?

Research, research, research. TIAA, Fidelity and URS have a variety of information resources available to you. You may contact any of the retirement companies by phone, online and by scheduling individual counseling sessions.