

2025 Benefits Open Enrollment



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CORPORATION



7

Questions To Ask About Open Enrollment

1. What is Open Enrollment?
2. What dates do I need to remember?
3. What are the changes for 2025?
4. What plans are offered?
5. What will the plans cost this year?
6. What do I need to do?
7. Where can I find more information?

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1

What is Open Enrollment?

Time to review coverage options and make changes that are best for you, such as:

- ✓ Change your medical plan enrollment
- ✓ Enroll in a new plan
- ✓ Add or drop a dependent on your plan
- ✓ Enroll/Reenroll in the Health Care or Dependent Care FSA
- ✓ Enroll/Reenroll in parking/transit
- ✓ Begin contributing to or making changes to your HSA
- ✓ Review/Update your Life Beneficiaries

**Open Enrollment is
October 25th – November 8th, 2024**

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2

What dates do I need to remember?

11/08/24

Deadline for making changes

01/01/25

Your benefit changes take effect

Don't forget!

Add these date reminders to your calendar.

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If you **miss the deadline** this year,

2025 2026

you will have to wait until the **2026** open enrollment to make changes — unless you have a qualifying life event.

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2025 Updates, Changes and Reminders

- No premium changes to your Medical or Dental plans.
- Vision coverage premium changes and enhancements. **New:** LASIK coverage on the vision plan.
- Short-Term Disability **enhancement** for 2025.
- **New:** Voluntary Accident and Hospital coverage through Cigna.
- Voluntary Life and AD&D for this Open Enrollment ONLY, elect up to the full Guaranteed Issue amount without EOI.
- Enroll or Re-enroll in a Healthcare Flexible Spending Account (FSA), Limited Purpose FSA in addition to the Dependent Care FSA for 2025 through HSABank. *Please note that your current 2024 election will not rollover into the 2025 plan year.*
- Take advantage of the Livongo Chronic Condition Management and Diabetes Prevention Program when enrolled with Premiera.
- Remember to earn your 2025 incentive funding through Personify Health (previously Virgin Pulse).
- Create an account at Premiera.com and access you and your dependents EOBs and additional medical benefit information.
- Remember to Download the Premiera Mobile and Personify Health App

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What plans do we offer?

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Medical No Plan Changes

	Consumer Driven Plan with HRA	Consumer Driven Plan with HSA	High Deductible Basic Plan (with or without HSA)
Annual In Network Deductible	\$2,000 individual / \$4,000 family	\$1,650 individual / \$3,300 family	\$5,000 individual/\$10,000 family
UIC Fund contribution	\$800 individual/ \$1,600 family	\$800 individual/ \$1,600 family	–
In Network Out of pocket Maximum	\$3,300 individual / \$6,600 family	\$3,300 individual / \$6,600 family	\$6,000 individual/\$12,000 family
Coinsurance (the percentage covered by the plan)	80% In-network / 60% Out-of-network *after deductible	80% In-network / 60% Out-of-network *after deductible	70% In-network / 50% Out-of-network *after deductible
Preventive Services	Covered at 100%, no deductible	Covered at 100%, no deductible	Covered at 100%, no deductible
Prescription Drug Retail	30-day supply	30-day supply	30-day supply
Preferred Generic	\$10 copay after deductible	\$10 copay after deductible	\$10 copay after deductible
Preferred Brand	\$30 copay after deductible	\$30 copay after deductible	\$30 copay after deductible
Preferred Specialty	\$50 copay after deductible	\$50 copay after deductible	\$50 copay after deductible
Non-preferred	30% after deductible	30% after deductible	30% after deductible
Prescriptions - Home Delivery (90-day supply)	\$20 / \$60 / \$100	\$20 / \$60 / \$100	\$20 / \$60 / \$100

In-network benefit coverage levels shown above. Out of network services are covered but may have higher deductibles, coinsurance and out of pocket maximums. Refer to your plan documents.

Prescription copays still apply after out-of-pocket max has been met.



Essentials Drug Coverage

Remember to check the formulary for any changes the covered Rx for 2025, using the PV Core Plus network option.

Remember: Generic Prescription Medications are FDA approved and contain the same Active Pharmaceutical Ingredient than brand name counterparts. Generics are also a better cost savings for you and can cost you 20% - 60% less.

Call 800-722-1471 to speak with someone about your prescriptions.

Check your tier – Use Drug List E4

<https://www.premera.com/visitor/covered-drugs>

Your plan has four tiers that determine your cost.

\$ Tier 1 \$10 copay after ded	Preferred Generic
\$\$ Tier 2 \$30 copay after ded	Preferred Brand Name
\$\$\$ Tier 3 \$50 copay after ded	Preferred Specialty
\$\$\$ Tier 4 30% after ded	Non-preferred all drugs

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Teladoc Health

UIC offers Teladoc Health (previously Livongo) at no cost to Premera Blue Cross members and covered dependents who qualify.

Diabetes Management	Diabetes Prevention Program	Hypertension Management	Weight Management
<p>A personalized way to manage diabetes.</p> <ul style="list-style-type: none">• Receive a connected blood glucose meter• Unlimited strips and lancets• Tips, action plans and one-on-one coaching• Real-time support for out-of-range readings	<p>Reduce your risk of type 2 diabetes.</p> <ul style="list-style-type: none">• Team of expert coaches to support you• Receive a smart scale that syncs to the app• All-in-one weight, activity and food-tracking program	<p>Make managing your blood pressure easier.</p> <ul style="list-style-type: none">• Receive a connected blood pressure monitor• One-on-one support from expert coaches• Personalized tips on nutrition and activity	<p>Improve nutrition, exercise and weight loss.</p> <ul style="list-style-type: none">• Receive an advanced smart scale• Personalized action plan• Ongoing expert coaching• Full nutrition, exercise and weight-loss support

Visit TeladocHealth.com/Go/PREMERAALASKA or call 800-835-2362 and use registration code: PREMERAALASKA.



Premera Online Tools

Go to www.premera.com and register

- Find a doctor or service
- Review Explanation Of Benefits (EOBs)
- Compare cost for medical services
- Submit claims
- Order ID cards
- And more!

Or Call Premera's dedicated UIC Customer Service Line 844-236-1842

8 a.m. to 6 p.m. Pacific time, Monday – Friday for assistance

Premera also has a mobile app available for Android, iPhone and Windows mobile devices.



Aetna Dental Plans

No Plan Changes

Benefit	Core Plan In-Network	Buy Up Plan In-Network
Plan Deductible	\$50 individual \$150 family	\$50 Individual \$150 Family
Calendar Year Benefit Maximum	\$1,500 per covered individual	\$2,500 per covered individual
Preventive (Oral exams, cleanings)	100% deductible waived	100% deductible waived
Basic (Fillings)	80%*	80%*
Major (Crowns)	50%*	50%*
Orthodontia Adult/Child	Not covered	50% up to a \$5,000 Lifetime Maximum

Aetna does not provide ID cards. Please register at www.aetna.com to print your ID card.

**The percentage is what the plan pays after you have met the deductible.*



VSP® Vision Care Plan Plan Enhancements

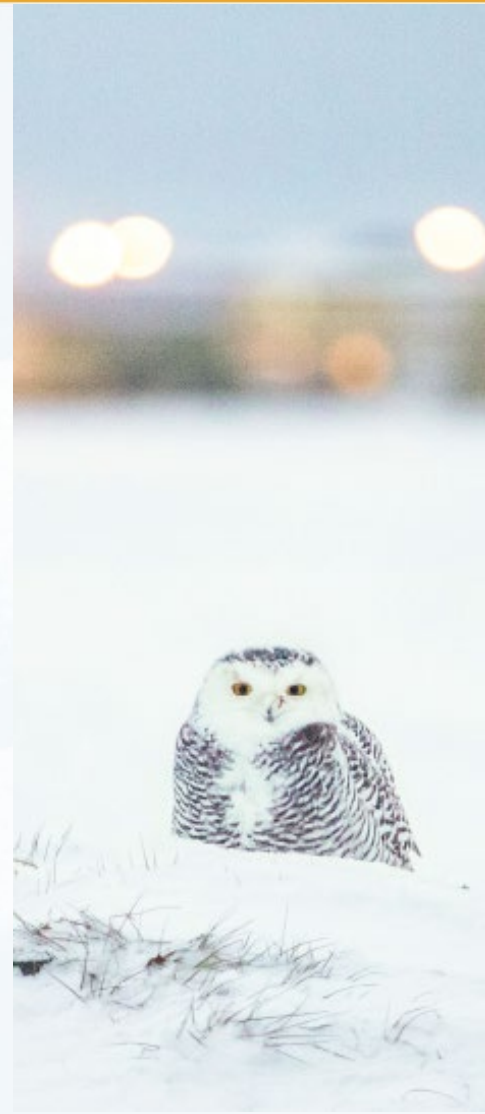
Benefit	VSP Provider	Out-of-Network Provider
Eye Exam Co-pay	\$20	\$20
Eye Exam: Every 12 months	<ul style="list-style-type: none"> Covered 100% 	<ul style="list-style-type: none"> Reimbursed up to \$50
Materials Co-pay	\$0	\$0
Frame	<ul style="list-style-type: none"> \$200 allowance every 12 months 20% discount on amount over your allowance 	<ul style="list-style-type: none"> \$70 allowance every 12 months
Lenses	<ul style="list-style-type: none"> Covered in full every 12 months Single Vision, lined bifocal, lined trifocal, and lenticular lenses Standard progressives covered-in-full Anti Reflective Coatings covered with \$35 copay Polycarbonate lenses for dependent children 	<ul style="list-style-type: none"> Covered every 12 months Allowances <ul style="list-style-type: none"> Single Vision \$50 Lined bifocal \$75 Lined trifocal \$100
Contacts	<ul style="list-style-type: none"> Available every 12 months; in addition to lenses or complete pair of glasses. Up to \$60 copay for fitting and evaluation \$200 allowance 	<ul style="list-style-type: none"> Available every 12 months; in addition to lenses or complete pair of glasses. \$105 allowance Contact lens exam is not covered and is a private transaction.
Extra Savings and Discounts	<ul style="list-style-type: none"> Available through VSP doctors only 	<ul style="list-style-type: none"> Not available
NEW: Laser Vision Correction	We have upgraded to the VSP Laser VisionCare Preferred Program, which gives you a \$2,300 per eye toward your laser vision procedure. Approved procedures include LASIK, Custom LASIK, Bladeless LASIK, PRK, Custom PRK, SMILE or Contoura.	

VSP does not provide ID cards. Please visit www.vsp.com to print your ID card.

As a reminder; Walmart is included In-Network.

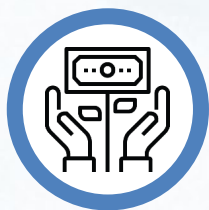


SPENDING ACCOUNTS



Health Savings Accounts (HSA)

If you enroll in the tax-qualified CDHP + HSA plan or High Deductible Basic plan, you may be eligible to open and contribute pre-tax dollars into a personal Health Savings Account (HSA) through HSA Bank.



TRIPLE TAX ADVANTAGES

TAX-FREE

- Contributions
- Withdrawals
- Interest and earnings



USE IT TODAY...

- Medical, dental, vision
- 100% vested
- You own the account



...AND IN THE FUTURE

- Grow your account
- Balance earns interest
- Retirement savings

*Federally tax-free.

States of AL, CA and NJ tax HSA contributions.

States of NH and TN tax HSA interest and earnings.

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Are you eligible for an HSA?



Must be enrolled in HDHP

May not have a healthcare flexible spending account (including spouse FSA)

Cannot be claimed as a tax dependent

May not be enrolled in Medicare, Medicaid or Tricare

May not be enrolled in any other non-HDHP

IHS (Indian Health Services) Eligibility: If you are eligible to receive services at an IHS facility, you must not have received such services during the previous three months to be eligible to receive HSA contributions.

- Note: Employees are required to notify Human Resources if they enroll in and then become ineligible for the HSA during the plan year.



Are you eligible for an HRA?

To be eligible, you must be enrolled in one of our HDHP Medical Plans – that's it! If you did not meet the requirements for the HSA, this may be an option for you!

What is a Health Reimbursement Arrangement (HRA)?

It is an employer-funded account that reimburses employees for incurred medical expenses. HRAs also provide an option for those enrolled in HDHPs who are not eligible for HSAs, offering a tax-advantaged way to manage healthcare expenses.

Key Features of HRAs:

- Employer-Funded: Contributions are made solely by the employer; employee are not able to contribute.
- Tax Advantages: Reimbursements are tax-free for employees.
- You can use the money in your HRA for your annual deductible or any other eligible medical expenses (only) you have throughout the year.
- Unused funds will rollover year to year.
- Funds are not portable, if you leave the company, they will be forfeited.

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HSA vs HRA

	HRA	HSA
Who Contributes?	UIC Only	UIC/Individual
Owned by?	Employer	Individual
Are Funds Portable?	No	Yes
Do funds rollover year to year?	Yes	Yes
What happens if I leave the Company?	Funds are forfeited	HSA balance remains with the employee
What Expenses are Eligible?	Medical only	All IRS Code 213(d) expenses
Can I use the account for non-medical expenses?	No	Yes, but are taxable
Contribution Limits	N/A	Employee Only: \$4,300 Family: \$8,550
Employer Contribution \$800 Employee Only \$1,600 Employee + Dependents	50% available 1/1 (or upon entry) 50% available within 60 days of completing incentive	50% incrementally funded through payroll (or upon entry) 50% available within 60 days of completing incentive

Flexible Spending Accounts (FSA)

Medical Flexible Spending Account

- Set aside up to \$3,300 before taxes for qualified healthcare expenses
- Access entire amount on 1st day of plan year
- Use money for eligible out-of-pocket medical expenses such as deductibles and copays
- If you are enrolled in the HDHP with HSA, sign up for the Limited FSA (Dental & Vision only)

Dependent Care Spending Account

- Set aside up to \$5,000 per household per calendar year before taxes for dependent care expenses
- Access money only once it's deducted from your paycheck
- Eligible expenses include daycare/in-home care for children under 13 years and incapacitated tax dependent adults



You must re-enroll each year to continue participation.

You must submit reimbursements by March 31st for expenses incurred between January 1st and March 15th of the following year. **Use it or lose it!**

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Parking and Transit

Parking Reimbursement Eligible Expenses:

- Fees for parking on or near employer's premises
- Fees for parking at or near a mass-transit location (allowing you to commute via mass-transit)
- Fees for parking at or near a car-pooling meeting site
- Parking provided to you where your employer pays directly to a parking lot operator
- Parking that an employer provides on its premises that requires a lease

Once you enroll you will receive a debit card you can use to pay for your parking/transit expenses.

Transit & Parking Plan Maximums: \$325 each per month.

You must re-enroll each year to continue participation.

Commuter Benefit Eligible Expenses:

- Transit Pass or Token
- Transit Voucher
- Transit Fare-Care
- Commuter Highway Vehicle Expense*
- Van-Pooling

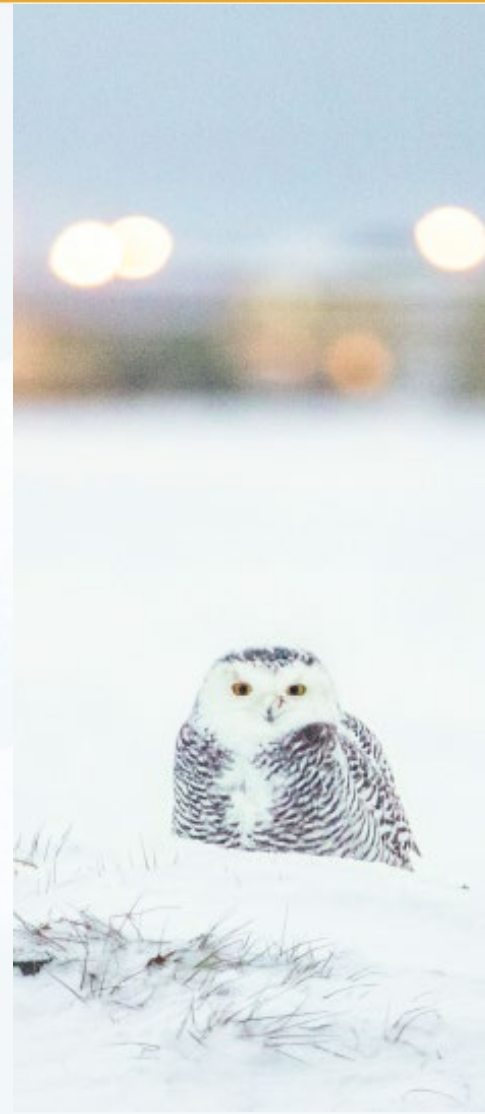
*A Commuter Highway Vehicle is any highway vehicle with a seating capacity of at least six adults, not including the driver, used for travel between the employee's residence and place of employment.

NOTE: Similar items may also be eligible for reimbursement pending approval from your employer. Expenses must be provided by a Mass Transit Facility of Qualified Van Pooling Service.

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WELLNESS INCENTIVE



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2025 Wellness Incentive

Personify Health

Employees who are enrolled in the HSA or HRA medical plan for 2025 have the option to complete the company wellness incentive to receive a company contribution into their medical account.

The wellness incentive requirements have remained the same, and company contribution amount has remained the same for 2025.

2025 Wellness Incentive Requirements:

- **Complete an Online Health Check Survey**

AND

- **Earn 5000 points by completing activity of your choice or receive preventative service**

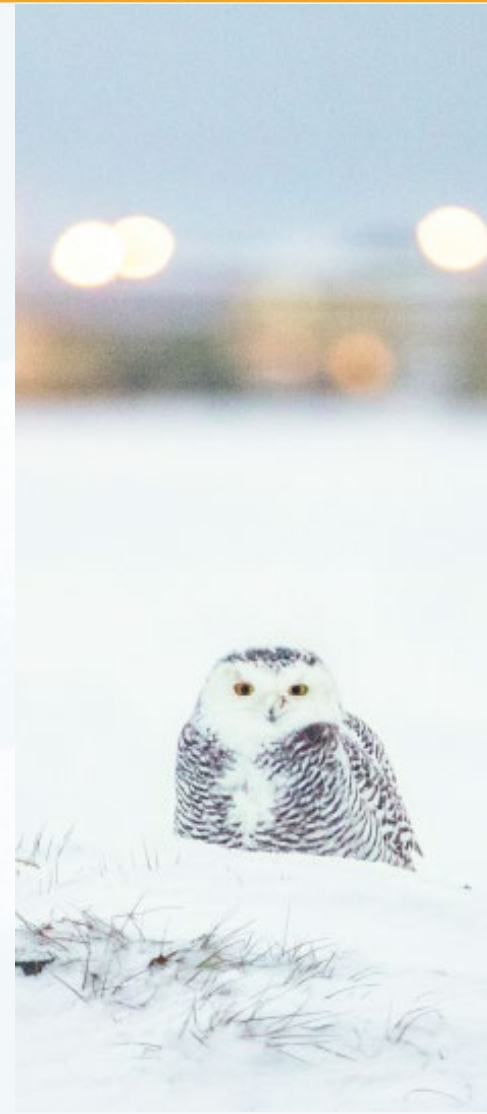
Registration: www.join.personifyhealth.com/UIC

Support: Support@personifyhealth.com

FAQ - Employees who have a spouse on the medical plan will also need to have their spouse complete the wellness incentive as well to receive the full wellness funding amount. Employees who enroll in the Basic medical plan are not eligible for the wellness incentive funding.

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DISABILITY & ADDITIONAL BENEFITS



New York Life Basic Life & AD&D Short- & Long-Term Disability

Basic Life & AD&D benefit:

- 2 times earnings to a maximum benefit of \$200,000
- Beneficiaries for this benefit need to be designated

Short-Term Disability (STD)

- 60% of your weekly earnings, max benefit of **\$2,000** per week
- Duration of benefits after 7-day waiting period - 13 weeks
- There is no waiting period for an injury.

Long-Term Disability (LTD)

- 60% of your monthly earnings, maximum benefit of \$7,500 per month
- Benefits start if you are disabled for more than 90 days

This is a company paid benefit for most employees and cannot be declined.

(For SCA employees these benefits come out of health and welfare funding)





New York Life Voluntary Life Insurance and AD&D

Increase your basic coverage by purchasing additional individual term life insurance or accident insurance for yourself, your spouse, and your children.

- 5 times employee's salary to a max of \$500,000 in units of \$10,000 for themselves.
- 5 times employee's salary to a max of \$500,000 in units of \$5,000 for your Spouse, not to exceed 100% of the employee's approved life amount.
- Up to \$10,000 in units of \$2,000 for each dependent child.

Please Note:

- Open Enrollment is your opportunity to elect or make changes to your current voluntary life/AD&D coverage.
- This Open Enrollment ONLY, elect up to the full Guaranteed Issue amount without EOI.
- Coverage is available for child dependents over age 18, through 26, ONLY if they are a full-time college student
- Evidence of insurability is required for coverage over \$140,000 for employee and \$25,000 for spouses.
- Employees cannot have more coverage on their spouse and/or children than they have on themselves.



New York Life Short Term Disability Buy Up

- As a full time, employee, UIC provides you with short term disability coverage which pays **60%** of gross wages up to **\$2,000** for a maximum of 13 weeks.
- You also have the option to purchase a buy up of 10%, making the short-term disability benefit equal to **70%** of gross wages up to **\$2,500** for 13 weeks
- Premiums are paid by the employee via payroll deductions



Cigna Critical Illness Plan

- Critical illness insurance pays a one-time lump sum benefit amount upon the diagnosis of a covered disease or illness such as invasive cancer, paralysis, heart attack, stroke, etc.
- You can use this money to cover lost wages, childcare, travel, home care or regular household expenses.
- You can enroll in coverage of either \$5,000, \$10,000 or \$20,000 for yourself, plus your spouse and children.
 - *Coverage for your spouse will be 50% of your elected coverage*
 - *Coverage for your children will be 25% of your elected coverage*





Cigna Accident Plan

- Accident Insurance can pay you money for covered accidental injuries and their treatment.
- It can help you with out-of-pocket costs that your medical plan doesn't cover, like co-pays and deductibles. You'll have base coverage without medical underwriting. The cost is conveniently deducted from your paycheck.
- You can select between a Low Plan and a High Plan.

Low Plan Monthly Premium	
Employee	\$5.61
Employee + Spouse	\$14.88
Employee + Child(ren)	\$11.19
Family	\$20.45

High Plan Monthly Premium	
Employee	\$13.82
Employee + Spouse	\$25.50
Employee + Child(ren)	\$30.95
Family	\$42.63

In-depth benefits are located within your employee benefits guide, for more information and your review.





Cigna Hospital Plan

- Hospital Insurance helps covered individuals, and their families cope with the financial impacts of a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness, or childbirth. The money is paid directly to you – not to a hospital or care provider.
- The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as coinsurance, co-pays and deductibles.

Low Plan Monthly Premium	
Employee	\$8.18
Employee + Spouse	\$15.38
Employee + Child(ren)	\$18.39
Family	\$25.58

High Plan Monthly Premium	
Employee	\$13.82
Employee + Spouse	\$25.50
Employee + Child(ren)	\$30.95
Family	\$42.63

In-depth benefits are located within your employee benefits guide, for more information and your review.



Figo – Pet Insurance

Figo Pet Insurance offers an employee benefit discount of 5%, plus a multi-pet discount of 5%.

Employees can choose to add Veterinary Exam Fees for Accident and Illness Visit, Wellness & Dental and Extra Care Pack to their coverage for an additional cost.

Value Adds Include:

Figo Pet Cloud: 24/7 Pet Teleheath, A.I. Claims, Document Storage, and chat/play dates with other pet owners near by!

Category	Options
Benefit Limits	\$5,000, \$10,000 or Unlimited
Deductibles	\$100, \$250, \$500 or \$750
Reimbursements	70%, 80%, 90%, 100%
Preventive Care	Optional coverage
Sample Rates:	
3-Year-Old Small Mixed-Breed Dog: \$27.98/month (\$5,000/\$250/80% plan); \$32.64/month (\$10,000/\$250/80% plan); or \$37.06/month (Unlimited/\$250/80% plan)	3-Year-Old Domestic Shorthair Cat: \$17.21/month (\$5,000/\$250/80% plan); \$20.09/month (\$10,000/\$250/80% plan); or \$22.80/month (Unlimited/\$250/80% plan)

To enroll you can call 844-738-3446 and mention you are an employee of UIC or go to <https://bit.ly/3TbHnli>



- Discounts on thousands of well-being related purchases, including gym memberships, yoga classes, personal training sessions, and athletic apparel
- Popular recreational purchases, including theme park admission, lift tickets, movie tickets, and sporting event tickets
- Cultural activities such as museum admission, performing arts tickets, musical performances, and arts classes
- Travel purchases, including hotel stays, car rentals, cruises, and select airline tickets
- Over 1,000 online options to support well-being at home

This program is at no cost to you!

To get started, visit UIC.LifeBalanceProgram.com and create an account



TRICARE Supplemental Plan

TRICARE Supplemental Plan administered through Selman Co.

A TRICARE supplement plan wraps around your TRICARE health insurance coverage to help cover the cost TRICARE leaves behind. Plus, this plan gives you additional benefits, like the ability to seek care from any TRICARE authorized civilian facility or provider.

- Plan Deductible of \$100 per individual and \$200 per family
- Premiums include membership to American Military Retirees Association (AMRA)
- Discounted services available through AMRA (hotels, moving services, car rental, etc.)
- You must be enrolled in Tricare medical insurance in order to enroll in the Tricare Supplemental Plan
- You must be under age 65 and retired for 20 years to be eligible.



401 (k)

- Elections and changes can be made by using UKGPro Employee Self-Service (ESS) at any time during the year. Enrollments or changes would be made using the Life Events section of the system (once logged in, go to MySelf > Life Events)
- Access your account through the Principal Portal (www.principal.com/create-account) it can be used to make investment changes, loan requests, withdrawals, viewing statements and beneficiary designation.
- 2025 401 (k) contribution limits: \$23,500 annual contribution limit and \$7,500 annual catch up limit.



401(k) - Designate a beneficiary

Designate a beneficiary

Who gets my money
if I pass away?

Spouse

Child

Loved ones

Special
organization

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Employee Assistance Program (EAP) through Cigna

UIC understands that unresolved personal issues can affect every aspect of your life, including work performance.

UIC automatically provides for you and your family coverage through our Employee Assistance Program (EAP), at no cost to you!

Get 1-6 sessions per issue per year with a dedicated, licensed counselor at no cost to you. Start by calling or using live chat to get a referral. Through face-to-face or virtual sessions, get support on a range of topics, such as:

- › Relationships and parenting
- › Behavioral health and substance use
- › Stress management

Call anytime for questions or support | 877-622-4327
myCigna.com | Employer ID: uic (for initial registration)
TTY/TDD users | call 711



SCA, CBA and DBA Employees

- To comply with the Affordable Care Act, and offer affordable health coverage, SCA, CBA or DBA employees, who are **not currently enrolled** in one of UIC's group medical plans, **will default into employee-only coverage on the High Deductible Basic Plan effective 1/1/2025 unless** a waiver form and proof of other qualified medical coverage are provided.
- In accordance with Title 36; SCA, CBA or DBA employees with other medical insurance may opt out of UIC's medical coverage if the waiver and proof of other coverage is provided.



Waiver of Medical Coverage

- The medical waiver and proof of other qualified coverage can be uploaded to the UKGPro site by logging in and going to **Myself > My Documents > Add (blue plus sign) > Upload the document > name the document (John Smith waiver, etc.) > Category SCA Waiver > Save**
- Waivers for medical coverage need to be submitted every new plan year. Even if you submitted a waiver of coverage in 2024, a new one will be required for the 2025 plan year.
- The deadline for the waiver and proof of other coverage is **November 8, 2024**



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Plan Cost

Premiums for the Medical and Dental Insurance plans will not increase effective January 1, 2025.

There is an increase to the Vision plan for 2025.

Updated rate sheets are available on the UKG homepage.

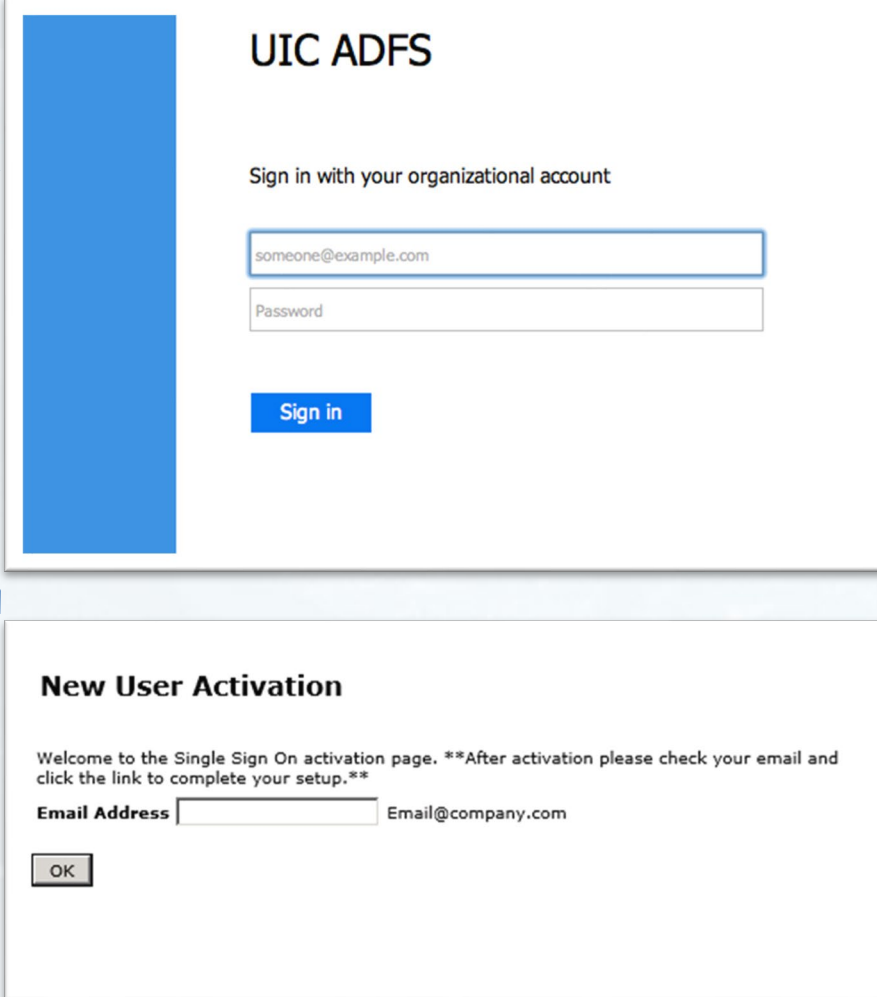
**Please make sure to click on your applicable
Employee Benefit site.**

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What do I need to do? UKGPro Enrollment

- Click on the following link to be taken to the UKGPro site.
<http://hr.uicalaska.com>
- If prompted enter your **UIC Network Username and Password**.
- After authentication you will be asked to activate your account. Enter the requested information. Within a few minutes you will receive an email. Click the link in the email to complete activation.
- Where to begin once logged in:
Menu > Myself > Open enrollment
- Still having trouble? Email IT Help Desk at
helpdesk@uicalaska.com



The image shows two screenshots of the UIC ADFS system. The top screenshot is the login page, titled 'UIC ADFS', with a blue vertical bar on the left. It prompts the user to 'Sign in with your organizational account' and features input fields for an email address (pre-filled with 'someone@example.com') and a password, followed by a blue 'Sign in' button. The bottom screenshot is the 'New User Activation' page. It includes a welcome message, instructions to check email for a setup link, and a form with an 'Email Address' field (pre-filled with 'Email@company.com') and an 'OK' button.

UIC ADFS

Sign in with your organizational account

someone@example.com

Password

Sign in

New User Activation

Welcome to the Single Sign On activation page. **After activation please check your email and click the link to complete your setup.**

Email Address Email@company.com

OK

7

Where can I find more?

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Additional Resources

Be sure to visit the updated
MyBenefits.Life Portal for further
information and resources
**Links for the websites are located
on the UKG home page**

MyBenefits.Life

Access Benefit plans, contacts and
documents, Explainer videos and
articles, and Financial wellness tools

uic.mybenefits.life



Additionally, your employee benefits guide provides contact information,
policy numbers and our Health Advocate services for extra support!



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Questions?

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