



MEDICAL INSURANCE CHOICES (See p. 4 if you have a domestic partner)**

All offer nationwide networks, prescription drug coverage, comparable coverage/exclusions.

<p>Exclusive Provider Organization (EPO)—United Healthcare, Blue Cross, Blue Shield of AZ, Aetna, Cigna</p>	<ul style="list-style-type: none"> • In-network coverage only, except emergency care • No deductible, co-pays for services and prescriptions • Lower premium
<p>Preferred Provider Organization (PPO)—United Healthcare, Blue Cross Blue Shield of AZ, Aetna</p>	<ul style="list-style-type: none"> • Annual deductibles – separate in-network & out-of-network • Co-pay only in-network, 50% co-insurance out-of-network • Higher premium
<p>Health Savings Account (HSAO) with Flexible Spending Account—Aetna</p>	<ul style="list-style-type: none"> • Separate annual deductibles for in-network services, out-of-network services, and non-preventive prescriptions • Preventive care/immunizations at no charge; other services 10% co-insurance in-network, 50% co-insurance out-of-network • Paired with a Health Savings Account to which UA contributes \$60/month for employee only or \$120/month for family coverage • Lowest premium

Provider Searches: <http://hr.arizona.edu/employees-affiliates/benefits/insurance-benefits/arizona-department-administration-adoa-health-plans#hdr-3>

DENTAL INSURANCE CHOICES (See p. 4 if you have a domestic partner)**

<p>Delta Dental</p>	<ul style="list-style-type: none"> • Can visit any licensed dentist, including international • Participating dentists agree to lower costs • Routine services (2 cleanings/exams) at no charge • \$2,000 annual coverage limit with \$50 single/\$100 employee + 1/\$150 family deductible • Basic services (e.g., fillings): 80% covered • Restorative services (e.g., crowns, dentures): 50% covered • \$1,500 lifetime orthodontia • Higher premium
<p>Cigna Dental Care HMO</p>	<ul style="list-style-type: none"> • Dental HMO – must see contracted dentist • Smaller but nationwide network • No charge for cleaning & exams; all other services have fixed co-pays • Co-pay for 24 months of orthodontia is \$2,040.00 (children) or \$2,376.00 (adults) • Lower premium

Delta Provider Search: <http://www.deltadentalaz.com/provider-search/dental/index.asp>

Cigna Provider Search: <https://hcpdirectory.cigna.com/web/public/providers>

VISION INSURANCE: AVESIS

- \$10 co-payment for routine eye exam annually (optometrist)
- Annual frame or contact lens allowance (\$150)
- Single-vision or bifocals covered in full
- \$300 lifetime allowance for Lasik
- Discount program available if you don't enroll

FLEXIBLE SPENDING ACCOUNTS

- Available for health care (separate from the HSA) or dependent care up to age 13.
- 100% employee paid.
- Allows you to set aside money pre-tax for eligible expenses.

LIFE INSURANCE

- UA provides \$15,000 Basic Term Life
- Includes \$15,000 Accidental Death/Dismemberment

Supplemental Life Insurance

- Can elect coverage for yourself and for spouse/dependents.
- 100% employee paid through payroll deductions.
- May enroll in one *or both* insurance plans (up to \$500,000 each, or \$1 million total).
- Both are guaranteed issue.
- Both include AD&D benefits.
- Both options are portable on separation of employment.

The Hartford	Aetna
Purchase in \$5,000 increments, up to \$500,000	Purchase in multiples of annual salary up to \$500,000
Dependent term life available in \$2,000, \$4,000, \$6,000, \$10,000, \$12,000, \$15,000, or \$50,000 per eligible dependent	Dependent coverage of \$5,000 spouse and \$5,000 for each eligible child is available

SHORT-TERM DISABILITY INSURANCE

Unum	The Hartford
3 options: \$750, \$1,500, or \$2,000 per week maximum benefit	Maximum benefit \$769.27 per week
May receive benefits while using paid sick/vacation time	Benefits are offset by paid sick/vacation time
Cost: 71¢ per \$100 of salary	39¢ per \$100 of salary
Includes \$5,000 life insurance and \$30,000 AD&D policy	Partial benefits available if return to work less than full-time
Maximum duration: 26 weeks	Maximum duration: 26 weeks minus waiting period, if applicable
Benefits begin day 1 if hospitalized or for surgery, day 31 if not hospitalized	Benefits begin day 1 if due to an accident, day 31 if due to illness

SUPPLEMENTAL RETIREMENT PLANS

- These plans are 100% employee-paid, and participation is optional.
- **You may enroll at any time, including outside of Open Enrollment**
- Contributions are made through payroll deduction.
- May elect one or both plans.
- Maximum annual contribution amounts subject to IRS limits

Voluntary 403(b) Plan	457(b) Deferred Compensation Plan
Choice of mutual funds through Fidelity Investments or annuities through TIAA	Variety of investment options through Nationwide
Choice of pre-tax or post-tax (i.e., Roth) options, or combination of both.	Pre-tax (traditional) and post-tax (Roth) options are available
Loans, hardship withdrawals are permitted	Loans are permitted
Withdrawals permitted after age 59½, while active or anytime after separation from service	Withdrawals permitted any time after separation from service

UA ALTERNATIVE HEALTH PLANS FOR EMPLOYEES WITH DOMESTIC PARTNERS

Medical

United Healthcare HMO	<ul style="list-style-type: none"> • In-network coverage only, except emergency care • No deductible, co-pays for services and prescriptions • Premiums match the EPO plan
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Dental

Delta Dental	<ul style="list-style-type: none"> • Can visit any licensed dentist, including international • Participating dentists agree to lower costs • Routine services (2 cleanings/exams) at no charge • \$2,000 annual coverage limit with \$50 single/\$100 employee + 1/\$150 family deductible • Basic services (e.g., fillings): 80% covered • Restorative services (e.g., crowns, dentures): 50% covered • \$1,500 lifetime orthodontia • Higher premium
Total Dental Administrators (TDA)	<ul style="list-style-type: none"> • Dental HMO – must see contracted dentist • Smaller but nationwide network • No charge for cleaning & exams; all other services have fixed co-pays • Co-pay for orthodontia ranges \$2,800–\$3,700 • Lower premium

Vision Insurance: Avesis

- \$10 co-payment for routine eye exam annually (optometrist)
- Annual frame or contact lens allowance (\$150)
- Single-vision or bifocals covered in full
- \$300 lifetime allowance for Lasik
- Discount program available if you don't enroll

Provider Searches: <http://hr.arizona.edu/employees-affiliates/benefits/insurance-benefits/university-arizona-alternative-health-plans>