Universities are defined by their people, and you could say the people here were born to challenge "business as usual."
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Introduction

This guide provides an overview to help you understand your benefits options. The relevant plan documents, descriptions, and contracts provide the definitive information governing your benefits. The State of Arizona, the Arizona State Retirement System (ASRS), the Arizona Board of Regents (ABOR), and the University of Arizona reserve the right to modify, change, revise, amend, or terminate the plans at any time.

Register for New Employee Orientation
New employee benefits orientation workshops are held regularly on the Main and Tucson Health Sciences campuses. Register for an upcoming session and complete required online trainings. To register at the Phoenix Biomedical Campus, please contact your department.

For benefits questions, contact HR Solutions at 520-621-3660 or hrsolutions@email.arizona.edu. Benefits forms are available at hr.arizona.edu/forms.

Phoenix Health Sciences
602-827-2600 or comphx-hrservices@email.arizona.edu

Important Note
All important University communications, including benefits information, are sent to your official University email address. Please be sure your official email address is up to date in UAccess Employee.
Retirement Plans

Enrollment in a retirement plan is mandatory if you work 20 hours a week (.50 FTE) for 20 weeks or longer within a fiscal year. The University has two retirement plans. All employees may choose either plan.*

Arizona State Retirement System (ASRS), a defined benefit plan

Optional Retirement Plan (ORP), a defined contribution plan

You must enroll in the first 30 days of employment or new retirement eligibility.

If you do not elect a retirement plan, you will default into the ASRS. Your election or default election is irrevocable and cannot be changed during your continuous employment with the Arizona University System.

Postdoctoral scholars, graduate assistants, student workers, certain ASRS retirees, and FICA-exempt non-resident foreign citizens are not eligible to participate in the ASRS or ORP retirement plans. However, they may participate in voluntary supplemental retirement plans.

For questions about visa-related work hour limits, insurance requirements, and other restrictions on foreign scholars, contact Arizona Global.

*Does not apply to legacy classified staff or Public Safety Officers.
Arizona State Retirement System Plan

The Arizona State Retirement System (ASRS) is a defined benefit plan. Therefore, the benefit you receive is not defined by the amount you contribute.

**Key features of the ASRS defined benefit plan include:**

- Your benefit is a pension based on a formula of credited years of service, times a multiplier factor, times average monthly salary. The multiplier increases with years of service after 20 credited service years.
- ASRS contributions begin on week 27 of your employment, unless you have worked at the University in the last two years, or have contributed to ASRS previously and have not withdrawn your contributions. In these cases, contributions begin on your date of hire.
- The contribution rate is determined by actuarial projections, and may fluctuate from year to year.
- The contributions are directed by the plan administrator, not individual participants.
- The University matches employee contributions. Visit the [ASRS](https://www.asrs.az.gov) website for the current rates.
- Employees may purchase service time for previous qualified public employment.

**ASRS Resources**

- [ASRS Home Page](https://www.asrs.az.gov)
- [Member Education Meetings and Webinars](https://www.asrs.az.gov/education)
- [Service Purchases](https://www.asrs.az.gov/servicedelivery)

**To Enroll in ASRS**

**Elect the ASRS in UAccess Employee Self-Service.**

Visit the [ASRS enrollment page](https://www.asrs.az.gov) within 30 days of your date of hire/eligibility date and complete the online enrollment.

The code is 69V00040.

After you have completed the online enrollment, ASRS sends an email requesting beneficiary information.
Optional Retirement Plan

The ABOR–sponsored Optional Retirement Plan (ORP) is a **defined contribution plan**. Therefore, your benefit is determined by the amount that accrues in your account and depends on investment performance.

**Key features of the plan include:**

- Your contribution rate is a fixed 7% of annual salary, and the University matches this amount. You are immediately vested in your contributions. You must participate in the ORP for five years or be age 65 to be fully vested in the University's contributions.
- Deductions begin on the first day of the pay period following completion of your retirement plan enrollment.
- You direct how your investments are allocated across a variety of funds provided by either Fidelity Investments or TIAA.
- You may contribute to only one provider (i.e., Fidelity Investments or TIAA) at a time, but you may change the investment company once per fiscal year.
- Service purchases are not permitted.
- The ORP offers a Phased Retirement Program. For more information, visit the [Road Ahead](#) website.

**To Enroll in the ORP**

You must enroll through both the ORP investment provider website and UAccess Employee Self Service. If you do not enroll in the ORP in UAccess, your retirement plan automatically defaults to ASRS.

You must complete both steps within 30 days.

**First, select an ORP investment provider.** Visit that provider’s website to open an ORP account.

- **Fidelity Investments:** Use access code Plan Number 67444.
- **TIAA:** Click on “Ready to Enroll” and use access code AZQ192.

**Second, visit UAccess and log in to Employee/Manager Self Service.** If the University Employee Main Homepage does not appear by default, select it from the drop-down menu at the top of the page and then “Benefits” > “Benefits Enrollment.” Select the open event and follow the on-screen instructions.
The University’s ORP retirement plan providers regularly visit the Tucson Main Campus, UAHS Tucson, and Phoenix Biomedical Campus for individual counseling sessions with employees. Schedule a session to learn:

- About your retirement plan options.
- The best investment mix and strategy to meet your retirement goals.
- How to balance your spending priorities in order to save more.

**Fidelity Investments**

**Representative:** Damond Petersen, 866-588-2612

To schedule an appointment with Fidelity, call 800-343-0860 or visit the [online scheduler](#).

**TIAA**

**Representative:** Donn Fitch, 480-350-3209

To schedule an appointment with TIAA, call 800-732-8353 or visit the [online scheduler](#).

The University does not endorse outside financial advisors. Fidelity Investments and TIAA are the only ABOR-approved investment providers for the ORP.

**Content received from non-approved financial advisors or investment providers is never University-generated.**
<table>
<thead>
<tr>
<th>Plan Feature</th>
<th>Optional Retirement Plan (ORP)</th>
<th>AZ State Retirement System (ASRS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan Type</td>
<td>Defined contribution plan qualified under Internal Revenue Code 401(a)</td>
<td>Defined benefit plan qualified under Internal Revenue Code 401(a)</td>
</tr>
<tr>
<td>Contribution Amount</td>
<td>You and the University each contribute 7% of gross earnings on a pretax basis, up to the maximum amount the IRS allows per year.</td>
<td>You and the University each contribute a percentage of earnings on a pretax basis set by actuarial projections. This percentage can vary from year to year, but is currently 11.94%. Check the ASRS website for updated contribution percentages.</td>
</tr>
<tr>
<td>Control of the Investments</td>
<td>You select the investment company—Fidelity Investments or TIAA—and determine the investment allocations.</td>
<td>ASRS controls and monitors investments.</td>
</tr>
<tr>
<td>Retirement Benefits</td>
<td>Your retirement benefit is based on the performance of the investments you select. The ultimate account balance is a result of the amount of contributions invested into your account and the performance of your chosen investments.</td>
<td>Your retirement benefit is determined by the following formula: Total Credited Service × a Graded Multiplier (a percentage set by statute based on total years of service at retirement) × Average Monthly Compensation.</td>
</tr>
<tr>
<td>Vesting</td>
<td>You are immediately vested in your contributions. You must participate in the ORP for five years or be age 65 to be fully vested in the University’s contributions. You may be immediately vested in the University’s contributions if you have an active contract (monies invested) in a qualified defined benefit or defined contribution retirement program with a college, university, higher education organization, or research organization. Contact HR if you believe you should be immediately vested in the University’s contributions.</td>
<td>Vesting applies if you terminate ASRS membership. If you choose to withdraw your account balance, you are always fully vested in your own contributions. For ASRS members on or after July 1, 2011, you forfeit the University’s contributions if you withdraw the account balance upon termination of employment. This does not apply if you are terminated due to a reduction in force or position elimination, in which case an ASRS vesting schedule will apply.</td>
</tr>
<tr>
<td>Health Benefits upon Retirement</td>
<td>Health and dental benefit plans are available through the ADOA or the ASRS upon retirement. There is no health insurance premium subsidy upon retirement.</td>
<td>Health and dental benefit plans are available through the ADOA or the ASRS upon retirement. A retiree health insurance premium subsidy is available if you have at least five years of credited service in the ASRS plan. The amount of the premium subsidy is based on your years of service.</td>
</tr>
<tr>
<td>Loans</td>
<td>No loans are available.</td>
<td>No loans are available.</td>
</tr>
<tr>
<td>Long-Term Disability (LTD)</td>
<td>LTD coverage is required as part of ORP participation. The University pays the premium cost. Maximum benefit: $10,000/month. Provider: Securian</td>
<td>LTD coverage is required as part of ASRS participation and will begin with your ASRS membership. You and the University each contribute 0.77% of salary. Maximum benefit: None Provider: Broadspire</td>
</tr>
<tr>
<td>Purchase of Service Credits</td>
<td>Service credit purchases are not available.</td>
<td>You may be eligible to buy service credit for certain types of forfeited or non-eligible years of service. Contact ASRS for additional information.</td>
</tr>
<tr>
<td>Retirement Age</td>
<td>Normal retirement: Age 65 Phased Retirement • Age 62 (minimum) • Fully vested • Enter written agreement with the University • Allows for reduced work hours • Phased retirement period can be no longer than three years</td>
<td>For ASRS members on or after July 1, 2011: Normal Retirement • Age 55 plus 30 years of credited service; or • Age 60 plus 25 years of credited service; or • Age 62 plus 10 years of credited service; or • Age 65 Early Retirement At least age 50 with five years of credited service qualifies for reduced retirement benefits. For ASRS members before 2011, contact HR or ASRS for more information.</td>
</tr>
</tbody>
</table>
## COMPARISON OF ASRS AND ORP PLANS (cont.)

<table>
<thead>
<tr>
<th>Plan Feature</th>
<th>Optional Retirement Plan (ORP)</th>
<th>AZ State Retirement System (ASRS)</th>
</tr>
</thead>
</table>
| **Distribution Options at Retirement** | The following distribution options may be available to ORP retirees:  
• Full or partial cash withdrawal  
• Systematic withdrawal  
• Interest-only payments  
• Minimum distribution payments  
• Lifetime annuity option  
• Life expectancy option | The ASRS offers annuity options that may provide a monthly benefit for life, as well as non-annuity options. |
| **Distribution Options at Termination** | The following distribution options are available upon separation of employment from all Arizona University System employers:  
• Withdraw all or some of your vested funds  
• Roll over your account to an IRA or another qualified retirement account or  
• Leave the retirement account invested for a future benefit | The following distribution options are available upon separation of employment from all ASRS employers:  
• Obtain a refund of the vested portion of your account  
• Roll over pretax contributions to an IRA or another qualified retirement account or  
• Leave retirement account invested with ASRS in an inactive membership status for a future benefit |
| **Return to Work After Retirement** | Only restriction is that a return to work arrangement cannot be made prior to retiring. | You cannot work more than 19 hours per week for any state employer for 12 months after starting distributions. |
Supplemental Voluntary Retirement Plans

All University employees, including postdoctoral scholars, graduate assistants/associates, extended temporary classified staff, retirees, non-resident foreign citizens, and student workers, are eligible to participate in the Voluntary 403(b) Plan and the 457(b) Deferred Compensation Plan. Both plans are designed to help you save for retirement, and both offer the option of traditional pretax contributions or post-tax Roth contributions.

Both plans are offered through payroll deduction. The University does not make contributions toward these plans.

Voluntary 403(b) Plan

The Voluntary 403(b) Plan offered by ABOR allows you to invest with Fidelity Investments or TIAA. Contributions to the Voluntary 403(b) Plan can be deducted on a pretax or after-tax basis [Roth 403(b)].

You are encouraged to consult your tax advisor or representative from Fidelity Investments or TIAA to determine which option is best for you.

You can contribute a minimum of $5/pay period up to the annual IRS dollar limit. To view contribution limits, visit the IRS website.

You may roll over money from a previous employer’s retirement plan to the Voluntary 403(b) Plan, and you may consolidate accounts held with other investment providers.

Fund choices and more detailed information can be found in the Voluntary 403(b) Plan Guide.

The University does not endorse outside financial advisors. Fidelity Investments and TIAA are the only ABOR-approved investment providers for the Voluntary 403(b) Plan.

Content received from non-approved financial advisors or investment providers is never University generated.
Enrollment

Fidelity Investments provides the recordkeeping service for the Voluntary 403(b) Plan, so enrollment is done through Fidelity's NetBenefits site. You also need to open an account directly on TIAA's website if you wish to invest with that provider. Step-by-step enrollment instructions are available here. Contact the appropriate retirement advisor below for assistance with opening a 403(b) account and selecting your investments.

Fidelity Investments 403(b) plan
Damond Petersen 866-588-2612

To schedule an appointment with Fidelity, call 800-343-0860 or visit the online scheduler.

TIAA
Donn Fitch 480-350-3209

Access code to create TIAA 403(b) account: 406545UA

To schedule an appointment with TIAA, call 800-732-8353 or visit the online scheduler.
457(b) Deferred Compensation Plan

The 457(b) Deferred Compensation Plan is available through Nationwide and is administered by the State of Arizona. This plan allows you to defer a pretax or post-tax (Roth) portion of your earnings into a supplemental retirement account.

Unlike other retirement plans, with a 457(b) deferred compensation plan you generally do not have to pay a penalty for retiring early or beginning to take income from the plan before you turn 59 years and six months old.

The investment options are different between the 403(b) and 457(b). You are advised to discuss your retirement savings strategy with your financial or tax advisor.

**Contribution Options:** You can contribute a minimum of $10/pay period up the annual IRS dollar limit. To view the contribution limits, visit the [IRS website](https://www.irs.gov).

For more information visit [457(b) Deferred Compensation Plan for the State of Arizona](https://www.nationwide.com).

If you have questions, contact Klark Krauter at krautek@nationwide.com or 520-262-0348. To enroll or make changes phone 800-796-9753 or go to the Deferred Compensation Plan website.
Benefits
Eligibility & Enrollment

Employees regularly scheduled to work 20 hours or more per week for six months or longer are eligible for full benefits for themselves, their spouse or domestic partner, and their dependents.

Employees who are regularly scheduled to work 20 hours or more for at least 90 days but less than six months are eligible for limited benefits, which include medical, dental, vision, life, and short-term disability insurance, as well as dependent life insurance and flexible spending accounts.

Employees with limited benefits do not accrue vacation and sick leave and are not eligible for Qualified Tuition Reduction (QTR).

Dependent Coverage

Dependents are defined as:

- Your spouse or domestic partner
- Your own or your domestic partner’s natural, adopted, or step children who are under age 26 or became disabled before the age of 19
- Children placed in your or your domestic partner’s guardianship pending adoption
- Your or your domestic partner’s foster children under the age of 26
- Children under the age of 26 for whom you or your domestic partner have court-ordered guardianship
Dependent Documentation Requirements

**Different Last Names:** If you are enrolling a dependent with a different last name from your own, you need to provide supporting documentation, such as a marriage license for a spouse or a birth certificate/court order for a dependent child.

**Domestic Partner/Child of Domestic Partner:** If you are enrolling a domestic partner or your domestic partner’s child(ren), you need to complete additional forms verifying eligibility and tax-qualified status.

- Qualified Domestic Partner Affidavit
- Child of Domestic Partner Declaration of Tax Status Form

**Disabled Child:** If your dependent child is disabled, you must file an application for continuation of dependent status within 31 days of the child turning age 19. You need to provide verification that your dependent child has a qualifying permanent disability that occurred prior to age 19, in accordance with 42 U.S.C 1382c.

Effective Date of Coverage for Benefits

Your benefits are effective the first day of the pay period following your completed enrollment. A calendar of pay period start dates can be found on the Payroll website.

How to Enroll in Benefits

Enrollment is completed in UAccess Employee. To enroll, follow these Benefits Enrollment Instructions.

Employees must complete their Retirement Enrollment first. The Benefits Enrollment becomes available 24 hours later.

A confirmation page is emailed to you after you complete your enrollment. You may also view your benefit elections in UAccess Employee Self Service. On the Employee Main Home Page, select “Benefits” > “Benefits Summary.” You may have to select a future effective date from the drop-down menu.

You have 31 days from your date of hire (or date of new benefits eligibility) to enroll in benefit plans. If you miss this deadline, you have to wait until the next annual Open Enrollment period.
ID Cards

ID cards for your medical, dental, and vision plans arrive separately, and are mailed directly from the vendor to your home address. Your ID cards should arrive 10 to 14 business days after your benefits become effective. Contact your vendors directly if you do not receive your cards or if you need replacement cards. Many of the insurance company websites allow you to print temporary ID cards.

Benefits Vendor Contact Information

Alternate ID

Your alternate ID is a 9-digit number used instead of your Social Security number to identify you for state-sponsored insurance purposes. Therefore, you need to provide this number on any insurance information or claim forms requesting your Social Security number. Claims using your Social Security number will be denied. Your alternate ID is different from your Employee ID.

A Note about Agency Transfers

If you transfer to the University from a benefits-eligible position at any other state agency (including other universities in the Arizona University System) with a break in service of less than 31 days, your benefit elections from your previous job remain in effect. You are eligible to transfer your sick leave balance to your new University position. Please contact the Division of Human Resources at 520-621-3660 or hrsolutions@email.arizona.edu within 30 days.

To find your Alternate ID in UAccess

From the Employee Main Homepage select “Benefits” > “Insurance Summary.”

(The Insurance Summary page will not list any medical, dental, and vision elections; those appear on the Benefits Summary.)
Changing Your Benefits

The annual Open Enrollment period usually occurs in mid-October to mid-November, during which you may add, drop, or change your benefits. Outside of Open Enrollment, you may change your benefit elections only if you experience a Qualified Life Event (QLE).

**Examples of QLEs include, but are not limited to:**

- Changes in your marital/domestic partnership status such as marriage, divorce, legal separation, annulment, dissolution of domestic partnership, or death of your spouse.
- Changes in your family composition such as birth, adoption, placement for foster care or adoption, or death of a child, or a child's loss of dependent eligibility due to age.
- Changes in an employment status that affect benefits eligibility such as losing or gaining coverage for you or your dependents.

Benefits changes due to birth, adoption, or placement for adoption are retroactive to the date of the event. The effective date for other QLEs is the first day of the pay period following submission of a completed QLE change form to Human Resources.

**QLE DEADLINE:** You must submit a completed [Qualified Life Event form](#) to Human Resources within 31 calendar days of the event and include documentation supporting the event.
Medical Insurance Plans

The Arizona Department of Administration (ADOA) options are available to any employee who is not enrolling a domestic partner. If you are enrolling a domestic partner or his/her children, please see the University Alternative Medical Plan for Employees with Domestic Partners. The University pays the majority share of the premium cost for all medical insurance plans.

Arizona Department of Administration Benefits Options Medical Plans

The same services are covered regardless of which option you pick:

- **EPO - Exclusive Provider Organization**
  
  **choice of:** Aetna, Blue Cross Blue Shield of Arizona, Cigna, or UnitedHealthcare networks

- **PPO - Preferred Provider Organization**
  
  **choice of:** Aetna, Blue Cross Blue Shield of Arizona, or UnitedHealthcare networks

- **HSAO - Health Savings Account Option**
  
  Aetna network only

Prescription coverage is automatically included with your medical enrollment.

Brief summaries of the EPO, PPO, and HSAO options follow. For detailed coverage information, including the Summaries of Benefits and Coverage and official plan documents, visit the ADOA Benefit Services Division website.
**EPO Plan**

Under the EPO plan, you must obtain services from a network provider. Out-of-network services are typically only covered in emergency situations. The deductible is $200 for individuals and $400 for families. There is a copay for covered services except for preventive care.

You may select one of four network options: Aetna, Blue Cross Blue Shield of Arizona, Cigna, or UnitedHealthcare.

**PPO Plan**

The PPO plan gives you the flexibility to see in-network or out-of-network providers. However, out-of-network services have higher costs. The PPO plan also has **in-network and out-of-network deductibles that must be met each year**: $1,000 individual/$2,000 family in network, $2,000 individual/$4,000 family out of network.

You may select one of three network options: Aetna, Blue Cross Blue Shield of Arizona, or UnitedHealthcare.

*Your covered services and premiums are the same whichever network you select. The roster of participating physicians and medical facilities may differ between plans.*
Health Savings Account Option (HSAO) Plan

The HSAO is a high-deductible health plan offered by Aetna that is paired with a Health Savings Account (HSA) with PayFlex. You can use the HSA to pay for qualifying dental, vision, and medical expenses for you and your eligible dependents.

The University contributes to the HSA for you each pay period ($30 for an individual, or $60 for a family). You may use those contributions to pay for qualified out-of-pocket expenses. You may also elect to make additional contributions to your HSA through pretax payroll deductions. The maximum amount you can contribute is adjusted annually by the IRS and depends on whether you are older or younger than age 55. The contribution limits can be found on the HSA Voluntary Contribution Designation Form.

Preventive services are covered with a copay under the HSAO (e.g., physicals, immunizations). For all non-preventive services, you must first meet a deductible ($1,400 individual or $2,800 for all other tiers) before services are covered. Once the deductible is met, you have co-insurance (10%) for non-preventive services until the out-of-pocket maximum ($2,000 individual or $4,000 for all other tiers) is met. You receive a PayFlex debit card that you may use to pay for qualified out-of-pocket expenses.

You can see in-network or out-of-network providers, but your costs may be higher if you do not use an in-network provider, plus you have a separate annual deductible ($2,700 individual/$5,400 family) and out-of-pocket maximums ($5,000 individual/$10,000 family). You may participate in the Banner Health/Aetna joint venture, where you pay 15% less on inpatient services at Banner hospitals.

There are some restrictions on who may contribute to an HSA to pay for medical expenses (in particular, you must not be on Medicare). Please review Internal Revenue Service Publication 969 and visit the ADOA website for more information.
<table>
<thead>
<tr>
<th>EPO Plan</th>
<th>Employee Premium (per paycheck)</th>
<th>Employer Premium (per paycheck)</th>
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</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$22.66</td>
<td>$291.31</td>
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<tr>
<td>Employee + 1 Adult</td>
<td>$67.41</td>
<td>$398.77</td>
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<tr>
<td>Employee + 1 Child</td>
<td>$57.22</td>
<td>$598.51</td>
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<tr>
<td>Family</td>
<td>$125.20</td>
<td>$655.71</td>
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<table>
<thead>
<tr>
<th>PPO Plan</th>
<th>Employee Premium (per paycheck)</th>
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<td>Employee Only</td>
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<tr>
<td>Employee + Adult</td>
<td>$121.80</td>
<td>$626.05</td>
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<td>Employee + Child</td>
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<td>Family</td>
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<th>Employee Premium (per paycheck)</th>
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<td>Employee Only</td>
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<td>Employee + Child</td>
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<td>Family</td>
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<td>$454.97</td>
</tr>
</tbody>
</table>

The University has 26 pay periods per year, but deductions are only taken twice a month.

Twice a year there are three pay periods in a month and one is a “premium holiday.”

In 2020 those paychecks are January 31 and July 31.

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine preventive health care</td>
<td>$0</td>
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**Office Visits**

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
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</thead>
<tbody>
<tr>
<td>Primary care physician (PCP)</td>
<td>$20</td>
</tr>
<tr>
<td>Doctor on Demand (telehealth)</td>
<td>$20</td>
</tr>
<tr>
<td>Mental health provider</td>
<td>$20</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>$20</td>
</tr>
<tr>
<td>Chiropractor</td>
<td>$40</td>
</tr>
<tr>
<td>Therapist (occupational, physical, respiratory, speech)</td>
<td>$40</td>
</tr>
<tr>
<td>Other specialist</td>
<td>$40</td>
</tr>
</tbody>
</table>

**Hospital and Outpatient Services**

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urgent care</td>
<td>$75</td>
</tr>
<tr>
<td>Emergency room</td>
<td>$200</td>
</tr>
<tr>
<td>Radiology (CAT, MRI, PET)</td>
<td>$100</td>
</tr>
<tr>
<td>Outpatient surgery</td>
<td>$100</td>
</tr>
<tr>
<td>Inpatient hospital admission (not applicable for maternity)</td>
<td>$250</td>
</tr>
</tbody>
</table>
Provider Search

To determine if your provider(s) participates in the network you would like to select, visit

**Aetna EPO**: Under Aetna Open Access Plans, select “Aetna Select (SM) (Open Access)” as your plan

**Aetna PPO or HSAO**: under Aetna Open Access Plans, select “Aetna Choice POS II (Open Access)” as your plan

**Blue Cross Blue Shield of Arizona**: Select the “Blue Card EPO/PPO” network if searching for an out-of-state provider

**United Healthcare EPO/PPO**: For the **EPO**, select “United HealthCare Choice” as your plan. For the **PPO**, select “United HealthCare Options PPO” as your plan.

**Cigna EPO**

Health Impact Program

The Health Impact Program (HIP) is an award-winning, incentive-based wellness program offered by ADOA designed to promote and encourage your health and wellbeing through sustained engagement in a variety of challenges, preventive health activities, and screenings. You earn points for each activity you complete, and if you log 500 validated points in the year, you are eligible to receive up to $200. To receive the payout, you must be active and benefits-eligible throughout the program year and the payout period. Find out more about HIP and create an account at [wellness.az.gov/hip](http://wellness.az.gov/hip).
Prescription Coverage

Pharmacy benefits are included with your medical enrollment and are offered through the MedImpact network. All prescriptions must be filled at a network pharmacy or through the mail-order service. Prescriptions filled outside of the network will not be reimbursed.

The pharmacy plan has a three-tier formulary. Mail-order and Choice90 programs offer some cost savings over a 30-day supply if you require medication on an ongoing basis. With mail-order, two copays are required for a 90-day supply. With the Choice90 program, you can obtain a 90-day supply at a local retail pharmacy for two and a half copays.

To find an in-network pharmacy and view the medications on the formulary, visit the MedImpact ADOA website.

### PHARMACY COPAYS

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Generic</th>
<th>Preferred Brand Name</th>
<th>Non-Preferred Brand Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail 30 days</td>
<td>$15</td>
<td>$40</td>
<td>$60</td>
</tr>
<tr>
<td>Retail 90 days</td>
<td>$37.50</td>
<td>$100</td>
<td>$150</td>
</tr>
<tr>
<td>Mail-order 90 days</td>
<td>$30</td>
<td>$80</td>
<td>$120</td>
</tr>
</tbody>
</table>

### HEALTH INSURANCE CONTACTS

**Important** Remember to use your Employee ID number (not SSN) when contacting medical, dental, vision, and flexible spending account carriers.

<table>
<thead>
<tr>
<th>Health Insurance Carrier</th>
<th>Customer Service</th>
<th>Group Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aetna</td>
<td>(866) 217-1953</td>
<td>476687</td>
</tr>
<tr>
<td>Blue Cross Blue Shield of AZ</td>
<td>(866) 287-1980</td>
<td>30855</td>
</tr>
<tr>
<td>CIGNA</td>
<td>(800) 968-7366</td>
<td>3331993</td>
</tr>
<tr>
<td>MedImpact (Pharmacy)</td>
<td>(888) 648-6769</td>
<td>003585 (Rx BIN); 28914 (PCN)</td>
</tr>
<tr>
<td>UnitedHealthcare</td>
<td>(800) 896-1067 (ADOA Plan)</td>
<td>705963 (ADOA Plan)</td>
</tr>
<tr>
<td></td>
<td>(800) 357-0971 (Alternative Plan)</td>
<td>730610 (Alternative Plan)</td>
</tr>
<tr>
<td>Walgreens Health Initiatives (Pharmacy - mail order and specialty only)</td>
<td>(866) 722-2141</td>
<td>Grp #0002 Active</td>
</tr>
<tr>
<td>Payflex</td>
<td>(855) 288-0470</td>
<td>476687-012</td>
</tr>
</tbody>
</table>
University Alternative Medical Plan

The University Alternative Plan is only available if you are enrolling a domestic partner as a dependent. It is administered by the University. You may enroll online in UAccess, but need to submit a [Qualified Domestic Partner Affidavit](#) form to verify eligibility.

The University Alternative Medical Plan is a Health Maintenance Organization (HMO) Plan with [UnitedHealthcare](#). With this plan, you must obtain services from an in-network provider. Out-of-network services are typically not covered except in emergency situations. The annual deductible is $400 after which you pay copays for service. The out-of-pocket maximum is $12,000.

The employee portion of the premium cost is the same as for the ADOA EPO plan.

**You may be taxed on the cost of benefits for your domestic partner and the partner’s dependents.**

<table>
<thead>
<tr>
<th>PREMIUMS: UNIVERSITY ALTERNATIVE MEDICAL PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alternative Plan</strong></td>
</tr>
<tr>
<td>Employee + 1 Adult</td>
</tr>
<tr>
<td>Family</td>
</tr>
</tbody>
</table>

**In-network Providers:** Select "United HealthCare Choice Plus" as your plan.

[Certificate of Coverage](#)

[Summary of Benefits and Coverage](#)
## COPAYS FOR UNIVERSITY ALTERNATIVE MEDICAL PLAN

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine preventive health care</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Office Visits</strong></td>
<td></td>
</tr>
<tr>
<td>Primary care physician (PCP)</td>
<td>$20</td>
</tr>
<tr>
<td>Virtual doctor visits</td>
<td>$0</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>$20</td>
</tr>
<tr>
<td>Chiropractor</td>
<td>$40</td>
</tr>
<tr>
<td>Therapist (occupational, physical, respiratory, speech)</td>
<td>$40</td>
</tr>
<tr>
<td>Other specialist</td>
<td>$40</td>
</tr>
<tr>
<td><strong>Hospital and Outpatient Services</strong></td>
<td></td>
</tr>
<tr>
<td>Urgent care</td>
<td>$75</td>
</tr>
<tr>
<td>Emergency room</td>
<td>$200</td>
</tr>
<tr>
<td>Radiology (CAT, MRI, PET)</td>
<td>$100</td>
</tr>
<tr>
<td>Outpatient surgery</td>
<td>$50</td>
</tr>
<tr>
<td>Inpatient hospital services</td>
<td>$250</td>
</tr>
</tbody>
</table>

## CONTACT UNITEDHEALTHCARE

<table>
<thead>
<tr>
<th>Provider</th>
<th>Customer Service</th>
<th>Group Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>UnitedHealthcare</td>
<td>800-357-0971</td>
<td>730610</td>
</tr>
</tbody>
</table>

## Prescription Coverage

Pharmacy benefits are included with your medical enrollment and offered through OptumRx. Mail order is available if you require medication for an ongoing health condition. With mail order, two and a half copays are required for a 90-day supply. To view the medications on the formulary, log in at myuhc.com. To find in-network pharmacies, visit the OptumRX website.

## PRESCRIPTION COPAYS FOR UNIVERSITY ALTERNATIVE MEDICAL PLAN

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Generic</th>
<th>Preferred Brand Name</th>
<th>Non-Preferred Brand Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail 30 days</td>
<td>$10</td>
<td>$35</td>
<td>$60</td>
</tr>
<tr>
<td>Mail-order 90 days</td>
<td>$25</td>
<td>$87.50</td>
<td>$150</td>
</tr>
</tbody>
</table>
Dental Insurance Plans

The ADOA options are available to employees who are not enrolling a domestic partner.

If you are enrolling a domestic partner or his/her children, please see the University Alternative Dental Plan for Employees with Domestic Partners.

The University pays a portion of the premium cost for all dental insurance options.

<table>
<thead>
<tr>
<th>ADOA DENTAL PREMIUMS</th>
<th>Delta Dental PPO</th>
<th>Cigna Dental Care (HMO)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Employee Premium (per paycheck)</td>
<td>Employer Premium (per paycheck)</td>
</tr>
<tr>
<td>Employee Only</td>
<td>$15.49</td>
<td>$1.78</td>
</tr>
<tr>
<td>Employee + Adult</td>
<td>$32.86</td>
<td>$3.56</td>
</tr>
<tr>
<td>Employee + Child</td>
<td>$25.28</td>
<td>$3.92</td>
</tr>
<tr>
<td>Family</td>
<td>$52.28</td>
<td></td>
</tr>
</tbody>
</table>

CONTACTS

<table>
<thead>
<tr>
<th>Provider</th>
<th>Customer Service</th>
<th>Group Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delta Dental of Arizona</td>
<td>800-352-6132</td>
<td>77777-0000</td>
</tr>
<tr>
<td>Cigna Dental Care DHMO</td>
<td>800-968-7366</td>
<td>4509541</td>
</tr>
</tbody>
</table>
ADOA Dental Plans Comparison

Here are brief descriptions of the two plan options. For detailed coverage information, please see the plan documents.

**Cigna Dental Care—Prepaid/DHMO Plan**
You must select a participating general dentist to provide and coordinate all of your dental care. Register on Cigna’s website, using these enrollment instructions. Each family member may choose a different general dentist. There are no annual deductibles or annual/lifetime maximums. There are also no waiting periods or preexisting condition exclusions. Specific copayments apply for services. See the schedule of services and charges for more information.

You can find a participating dentist at Cigna’s State of Arizona website.

Cigna Dental Care HMO is not available in the following states: Alaska, Maine, Michigan, Montana, New Hampshire, New Mexico, North Dakota, Puerto Rico, Rhode Island, South Dakota, Vermont, West Virginia, and Wyoming.

**Delta Dental PPO Plus Premier—Indemnity/PPO Plan**
You may see a licensed dentist inside or outside the United States. However, benefits may be greater if you visit a dentist participating in the Delta Dental network. There is no deductible for diagnostic and routine services. Deductibles ($50/person and $150/family) apply for other services. There is a maximum benefit of $2,000/person/plan year. Preventive and diagnostic services are covered at 100% and do not apply toward the annual maximum. There is a lifetime orthodontia benefit of $1,500, and your remaining costs may be lower with a Delta Dental network provider.

Find participating Delta Dental providers online.
<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Cigna Dental Care DHMO</th>
<th>Delta Dental PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductibles</td>
<td>None</td>
<td>$50/$100/$150</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Preventive Care</th>
<th>Copay</th>
<th>Co-insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit</td>
<td>$0</td>
<td>$0 · Deductible Waived*</td>
</tr>
<tr>
<td>Oral Exam</td>
<td>$0</td>
<td>$0 · Deductible Waived*</td>
</tr>
<tr>
<td>Prophylaxis/Cleaning (2/year)</td>
<td>$0</td>
<td>$0 · Deductible Waived*</td>
</tr>
<tr>
<td>Fluoride treatments</td>
<td>$0 (two per year)</td>
<td>$0 · Deductible Waived* (to age 18)</td>
</tr>
<tr>
<td>X-Rays</td>
<td>$0</td>
<td>$0 · Deductible Waived*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Basic Restorative</th>
<th>Copay</th>
<th>Co-insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Sealants</td>
<td>$12 per tooth</td>
<td>20% (to age 19)**</td>
</tr>
<tr>
<td>Filling</td>
<td>Amalgam: $0; Resin: $0–$115</td>
<td>20%</td>
</tr>
<tr>
<td>Extractions</td>
<td>Simple: $12; Surgical: $53–$125</td>
<td>20%</td>
</tr>
<tr>
<td>Periodontal Gingivectomy</td>
<td>$91 (1–3 teeth); $180 (4+ teeth)</td>
<td>20%</td>
</tr>
<tr>
<td>Oral Surgery</td>
<td>$125–$850</td>
<td>20%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Major Restorative</th>
<th>Copay</th>
<th>Co-insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Crowns</td>
<td>$150–$500</td>
<td>50%</td>
</tr>
<tr>
<td>Dentures</td>
<td>$680 upper or lower</td>
<td>50%</td>
</tr>
<tr>
<td>Fixed Bridgework</td>
<td>$135 per unit</td>
<td>50%</td>
</tr>
<tr>
<td>Crown/Bridge Repair</td>
<td>$490</td>
<td>50%</td>
</tr>
<tr>
<td>Implant Body</td>
<td>$1,025</td>
<td>50%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Orthodontia</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Child</td>
<td>24-month treatment fee.</td>
<td>50%</td>
</tr>
<tr>
<td>Adult</td>
<td>24-month treatment fee.</td>
<td>50%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Services</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>TMJ Exam, services,</td>
<td>Exams: $0</td>
<td>Not covered</td>
</tr>
<tr>
<td></td>
<td>Orthotic: $330</td>
<td>Not covered</td>
</tr>
<tr>
<td>External bleaching</td>
<td>$165</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Maximum Benefits</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Combined Preventive, Basic, and Major Services</td>
<td>No dollar limit</td>
<td>$2,000 per person</td>
</tr>
<tr>
<td>Orthodontia Lifetime</td>
<td>No dollar limit</td>
<td>$1,500 per person</td>
</tr>
</tbody>
</table>

* Routine visits and exams are covered only two times per year at 100%.
** Percentages indicate the percentage of cost you pay.
University Alternative Dental Plan Options

These plans are only for employees who are enrolling a domestic partner as a dependent. You may enroll online in UAccess, but need to submit a Qualified Domestic Partner Affidavit form to verify eligibility.

Total Dental Administrators—Prepaid/DHMO Plan

You must select a participating general dentist to provide and coordinate all of your dental care (register on the TDA website). Each family member may choose a different general dentist. There are no annual deductibles or annual/lifetime maximums. There are no waiting periods or preexisting condition exclusions. Specific copayments apply for services. Orthodontia ranges from $2,800 to $3,400 for children, and from $3,200 to $3,700 for adults.

You can find a participating dentist using the TDA provider search tool.

Delta Dental PPO Plus Premier—Indemnity/PPO Plan

You may see a licensed dentist anywhere in the world. However, benefits may be greater if you visit a dentist participating in the Delta Dental network. There is no deductible for diagnostic and routine services. Deductibles ($100/couple, $150/family) apply for other services. There is a maximum benefit of $2,000 per person per plan year. Preventive and diagnostic services are covered at 100% and do not apply toward the annual maximum. There is a lifetime orthodontia benefit of $1,500, and remaining costs may be lower with a Delta Dental network provider.

You can find participating Delta Dental providers online.

Plan Documents for the University Alternative Dental Plan

Total Dental Administrators Plan Summary

Delta Dental Summary of Benefits

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### UNIVERSITY ALTERNATIVE DENTAL PLAN RATES

<table>
<thead>
<tr>
<th>Plan</th>
<th>Employee Premium (per paycheck)</th>
<th>Employer Premium (per paycheck)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delta Dental PPO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee + Adult</td>
<td>$32.86</td>
<td>$7.09</td>
</tr>
<tr>
<td>Family</td>
<td>$52.28</td>
<td>$15.36</td>
</tr>
<tr>
<td>TOTAL DENTAL ADMINISTRATORS (HMO)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee + Adult</td>
<td>$3.56</td>
<td>$6.43</td>
</tr>
<tr>
<td>Family</td>
<td>$5.92</td>
<td>$8.96</td>
</tr>
</tbody>
</table>

---

### CONTACTS

**Delta Dental Plan of Arizona**
Customer Service: 800-352-6132
Group Number: 4602

**Total Dental Administrators**
Customer Service: 888-422-1995
Group Number: 680110
## UNIVERSITY ALTERNATIVE DENTAL PLAN COMPARISON CHART

<table>
<thead>
<tr>
<th></th>
<th>Total Dental Administrators DHMO</th>
<th>Delta Dental PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Plan Type</strong></td>
<td>Prepaid/DHMO</td>
<td>Indemnity/PPO</td>
</tr>
<tr>
<td><strong>Deductibles</strong></td>
<td>None</td>
<td>$100/$150</td>
</tr>
<tr>
<td><strong>Preventive Care</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Visit</td>
<td>$0</td>
<td>$0 - Deductible Waived*</td>
</tr>
<tr>
<td>Oral Exam</td>
<td>$0</td>
<td>$0 - Deductible Waived*</td>
</tr>
<tr>
<td>Prophylaxis/Cleaning</td>
<td>$0</td>
<td>$0 - Deductible Waived*</td>
</tr>
<tr>
<td>Fluoride/Cleaning</td>
<td>$0 (to age 15)</td>
<td>$0 - Deductible Waived* (to age 18)</td>
</tr>
<tr>
<td>X-Rays</td>
<td>$0</td>
<td>$0 - Deductible Waived*</td>
</tr>
<tr>
<td><strong>Basic Restorative</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Visit</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Sealants</td>
<td>$10 per tooth (to age 17)</td>
<td>20% (to age 19)**</td>
</tr>
<tr>
<td>Fillings</td>
<td>Amalgam: $10–$37 Resin: $26–$76</td>
<td>20%</td>
</tr>
<tr>
<td>Extractions</td>
<td>Simple: $30 Surgical: $60</td>
<td>20%</td>
</tr>
<tr>
<td>Periodontal Gingivectomy</td>
<td>$225</td>
<td>20%</td>
</tr>
<tr>
<td>Oral Surgery</td>
<td>$30–$145</td>
<td>20%</td>
</tr>
<tr>
<td><strong>Major Restorative</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Visit</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Crowns</td>
<td>$270 + $185 lab fee = $455</td>
<td>50%</td>
</tr>
<tr>
<td>Dentures</td>
<td>$325 + $275 lab fee = $600</td>
<td>50%</td>
</tr>
<tr>
<td>Fixed Bridgework</td>
<td>$270 + $185 lab fee = $455 per unit</td>
<td>50%</td>
</tr>
<tr>
<td>Crown/Bridge Repair</td>
<td>$75</td>
<td>50%</td>
</tr>
<tr>
<td>Inlays</td>
<td>$250–$327</td>
<td>Alternate benefit</td>
</tr>
<tr>
<td><strong>Orthodontia</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child</td>
<td>$2,800–$3,400</td>
<td>50%</td>
</tr>
<tr>
<td>Adult</td>
<td>$3,200–$3,700</td>
<td>50%</td>
</tr>
<tr>
<td><strong>TMJ Services</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exam, services, etc.</td>
<td>Prosthetics 20% discount</td>
<td>Not covered</td>
</tr>
<tr>
<td><strong>Maximum Benefits</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Combined Preventive, Basic and Major Services</td>
<td>No dollar limit</td>
<td>$2,000 per person</td>
</tr>
<tr>
<td>Orthodontia Lifetime</td>
<td>No dollar limit</td>
<td>$1,500 per person</td>
</tr>
</tbody>
</table>

* Routine visits and exams are covered only two times per year at 100%.
** Percentages indicate the percentage of cost you pay.
Vision Insurance

The Arizona Department of Administration (ADOA) options are available to any employee who is not enrolling a domestic partner. If you are enrolling a domestic partner or his/her children, please see the University Alternative Vision Plan for Employees with Domestic Partners. Vision plans are 100% employee paid.

ADOA Benefits Options Vision Plan

ADOA Benefit Options offers a fully insured vision plan (Advantage Program) and a vision discount program through Avesis. See the Avesis website for coverage information and a provider search for both the Advantage Program and Discount Program.

Avesis Advantage Program

This insurance plan provides annual coverage for a vision exam, an annual allowance for glasses or contact lenses, and a one-time $600 allowance toward LASIK. You may see in-network or out-of-network providers, although you may have higher out-of-pocket costs when seeing an out-of-network provider. To find participating Avesis providers visit the online provider search.

Avesis Plan Summary  |  Plan Documents

<table>
<thead>
<tr>
<th></th>
<th>Avesis Employee Premium (per paycheck)</th>
<th>Avesis Employer Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$2.00</td>
<td>$0</td>
</tr>
<tr>
<td>Employee + Adult</td>
<td>$6.47</td>
<td>$0</td>
</tr>
<tr>
<td>Employee + Child</td>
<td>$6.38</td>
<td>$0</td>
</tr>
<tr>
<td>Family</td>
<td>$8.05</td>
<td>$0</td>
</tr>
</tbody>
</table>

Avesis Discount Program

If you do not enroll in the Advantage Program Plan, you automatically receive an Avesis discount card at no cost. This program provides you with 20% discount on lenses and frames and a 10–20% discount on contact lenses with in-network providers only.
University Alternative Vision Plan

This vision plan with Avesis is provided by the University and is only available to employees who are enrolling a domestic partner as a dependent. You can enroll online through UAccess, but you need to submit a Qualified Domestic Partner Affidavit form to confirm eligibility.

Avesis Advantage Program

This insurance plan provides annual coverage for a vision exam, an annual allowance for glasses or contact lenses, and a 5–25% discount off retail cost on LASIK. You may see in-network or out-of-network providers. However, you may have higher out-of-pocket costs when seeing an out-of-network provider. To find participating Avesis providers visit the online provider search. For coverage information, please see the plan summary.

<table>
<thead>
<tr>
<th>VISION COVERAGE CHART</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Service</strong></td>
</tr>
<tr>
<td>Basic Eye Exam</td>
</tr>
<tr>
<td>Single Vision or Bifocal Lenses</td>
</tr>
<tr>
<td>Progressive Lenses</td>
</tr>
<tr>
<td>Frames</td>
</tr>
<tr>
<td>Contact Lenses</td>
</tr>
<tr>
<td>Vision Training</td>
</tr>
</tbody>
</table>

- Costs shown are in Avesis Network
- Each benefit is payable once every 12 months
- You must choose either contact lenses or frame benefit, not both

<table>
<thead>
<tr>
<th>UNIVERSITY ALTERNATIVE VISION PLAN RATES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Avesis</strong></td>
</tr>
<tr>
<td>Employee + Adult</td>
</tr>
<tr>
<td>Family</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT AVESIS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provider</strong></td>
</tr>
<tr>
<td>Avesis, Inc.</td>
</tr>
</tbody>
</table>
Flexible Spending Accounts

The Arizona University System offers employees two Flexible Spending Accounts (FSAs) through a third-party administrator of employee benefit programs, ASI. FSAs allow you to direct money from your paycheck into an account to pay for certain healthcare or dependent-care expenses. The money you place into the account is deducted before taxes are calculated. This means you pay less tax, and you have pretax money to spend on healthcare or dependent-care expenses.

You specify the annual dollar amount of your earnings to be deposited into one or both FSA accounts. The annual amount you elect is deducted in equal payments across all available pay periods in the calendar year. (The number of remaining pay periods depends on your date of hire.)

ASI Tax Savings Estimator

Eligible Expenses

Participant Plan Information

Healthcare FSA

You may contribute up to $2,700 annually to a healthcare FSA.

These funds can be used to pay for:
• copays
• deductibles
• eligible medical, dental, and vision expenses not covered by health plans
• over-the-counter drugs (with a prescription)
• prescription drugs
• illness-related transportation expenses for you and your eligible dependents.

Employees enrolled in the Health Savings Account Option (HSAO) plan with Aetna are not eligible to contribute to a Healthcare FSA. They do have the option of enrolling in a Limited Healthcare FSA and can use those funds for qualifying dental or vision expenses only.
Debit Card

With the healthcare FSA, you have the option of signing up for an FSA debit card. This card can be used to pay for eligible expenses incurred at doctors’ offices and certain grocery stores and pharmacies. (The debit card is not available with the dependent-care FSA.)

The debit card eliminates the need to submit claims to ASI for most copays and over-the-counter purchases. **Depending on the expense, ASI may request follow-up documentation, so it is still important to keep documentation.**

ASI mails a debit card application to your home address along with your FSA enrollment confirmation. It takes approximately two weeks to receive your debit card once ASI has received your application.

Dependent-Care FSA

You can use a dependent-care FSA for out-of-pocket child-care expenses for children younger than age 13. You can also use the account for out-of-pocket elder-care expenses if an elder is your dependent, lives with you at least eight hours each day, meets federal income guidelines, and requires assistance with daily self-care. **The dependent-care FSA cannot be used for your dependent’s medical expenses.** The annual limit for a dependent-care FSA is $5,000/couple ($2,500 if filing separately). The [ASI website](https://www.asi.com) lists eligible dependent-care expenses.
Filing FSA Claims

Claims are submitted directly to ASI, using its claim form and accompanied by supporting documentation. You can fax, mail, or electronically submit claims. Visit ASI’s website for more information on claim filing requirements. Please provide your Employee ID Number rather than your Social Security number on the claim form.

Reimbursement

You can elect to receive your reimbursement by check or direct deposit. To sign up for direct deposit and/or paperless notification, complete this form.

Deadlines

Each plan year runs January 1 to December 31. The deadline to submit expenses incurred during the plan year to ASI for reimbursement is April 30 of the following year. You can roll over up to $500 of unused healthcare funds for use in the following year. Any unused healthcare funds over $500 and all unused dependent-care funds are forfeited.

<table>
<thead>
<tr>
<th>CONTACT ASI</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provider</strong></td>
</tr>
<tr>
<td>ASI</td>
</tr>
</tbody>
</table>
International Healthcare Coverage

Medical Coverage

All three ADOA medical plans (EPO, PPO, and HSAO), plus the University Alternative Plans for Employees with Domestic Partners, cover only emergency care for participants traveling internationally. Prescriptions are not a covered benefit when traveling internationally.

University Risk Management Services and Arizona Global can advise employees and their families who plan on living or traveling outside the United States and wish to purchase short-term international medical insurance.

Dental and Vision Coverage

Delta Dental covers dental services as out-of-network. Total Dental Administrators and Cigna only cover emergency treatment. Avesis covers vision services as out-of-network.

For more detailed coverage information, please see the plan documents for the ADOA plans or University Alternative Plans.

State of Arizona International Insurance Coverage

The State of Arizona provides international insurance to University employees who are traveling as part of their employment, but not to accompanying family members. This insurance includes liability insurance, emergency medical care, care for work-related injuries, and medical evacuation/repatriation services.

Routine medical care and treatment for chronic conditions are not covered. For information about what is and is not covered, see the Risk Management Services website.
Life Insurance

Basic Life and AD&D Insurance

You are automatically covered for $15,000 of basic term life insurance and $15,000 of Accidental Death and Dismemberment (AD&D) coverage. This coverage is provided by Securian and administered by ADOA at no cost to you.

Securian offers various supplemental services with the basic life insurance coverage:

**Travel Assistance:** Coverage is provided through Securian by RedpointWTP and is available whenever you are traveling 100 or more miles away from your home. The program offers pre-trip assistance, medical assistance (including return of dependent children if hospitalized), and emergency personal services. Some services are only available to U.S. citizens. For questions, visit LifeBenefits.com/travel or call 855-516-5433.

**Lifestyle benefits include:**

- Legal, financial, and grief resources from LifeWorks U.S.
- Beneficiary financial counseling from Pricewaterhouse Coopers
- Legacy planning resources from Securian Financial

Details on these services are available online.
Supplemental Life & AD&D Insurance

You may choose to elect guaranteed-issue supplemental term life insurance in addition to the employer-paid basic life insurance coverage. You may elect one or both of the options offered by Securian (ADOA-sponsored) or Aetna (University-sponsored). The options have different costs and features, so please consult the plan comparison. Both options have portability and conversion options, and Aetna has a retiree continuation option.

During your initial new hire/eligibility enrollment or following a specific life or family change (QLE), you may elect up to the maximum coverage available to you. Otherwise, following your initial enrollment, you may elect to increase or decrease your supplemental life and AD&D coverage only during Open Enrollment, with annual increases limited to:

- Aetna: the amount of your salary
- Securian: $20,000

Coverage levels automatically adjust for changes in salary, and rates automatically adjust with age.

You pay all premiums for the life insurance coverage that you elect. Premiums for supplemental life coverage up to $35,000 are collected as a pretax paycheck deduction. Amounts beyond that are deducted post-tax. You can use the Benefits Calculators on the Human Resources website to calculate the premium cost.

You may also enroll your spouse/domestic partner and dependents:

- Aetna: $5,000 for spouse/domestic partner and each child
- Securian: $2,000 to $50,000 for spouse and each child; no coverage for domestic partners

For More Information

Official Coverage Documents: Aetna | Securian
For basic and supplemental life insurance, benefits are paid to the beneficiary or beneficiaries you designate. You may change your beneficiary designations in UAccess at any time. As your life situation changes, remember to check your beneficiary designations under “Benefits” > “Insurance Summary” and update as needed.
### SECURIAN AND AETNA SUPPLEMENTAL LIFE INSURANCE PLANS COMPARISON

<table>
<thead>
<tr>
<th>Age</th>
<th>Securian (per $1,000 coverage per month)*</th>
<th>AETNA (per $1,000 coverage per month)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–24</td>
<td>$0.06</td>
<td>$0.058</td>
</tr>
<tr>
<td>25–29</td>
<td>$0.06</td>
<td>$0.071</td>
</tr>
<tr>
<td>30–34</td>
<td>$0.068</td>
<td>$0.071</td>
</tr>
<tr>
<td>35–39</td>
<td>$0.075</td>
<td>$0.084</td>
</tr>
<tr>
<td>40–44</td>
<td>$0.121</td>
<td>$0.109</td>
</tr>
<tr>
<td>45–49</td>
<td>$0.158</td>
<td>$0.133</td>
</tr>
<tr>
<td>50–54</td>
<td>$0.249</td>
<td>$0.296</td>
</tr>
<tr>
<td>55–59</td>
<td>$0.355</td>
<td>$0.296</td>
</tr>
<tr>
<td>60–64</td>
<td>$0.626</td>
<td>$0.470</td>
</tr>
<tr>
<td>65–69</td>
<td>$0.626</td>
<td>$0.732</td>
</tr>
<tr>
<td>Age 70+</td>
<td>$0.981</td>
<td>$0.732</td>
</tr>
</tbody>
</table>

**Election options**
- Elect in $5,000 increments. During Open Enrollment, increases may not exceed $20,000.
- If you experience a qualifying life event during the year, you may elect any coverage option.

**Minimum Coverage**
- $5,000

**Maximum Coverage**
- $500,000 or 3x annual salary, whichever is less

**Spouse/Domestic Partner and Dependent Coverage**
- **Coverage / Monthly Cost**
  - $2,000 / $0.94
  - $4,000 / $1.88
  - $6,000 / $2.82
  - $10,000 / $4.70
  - $12,000 / $5.64
  - $15,000 / $7.05
  - $50,000* / $23.50
- Available for spouse and dependent children only
- *Must have a minimum of $35,000 Supplemental Life Insurance to elect $50,000 dependent coverage.

**Portability/Conversion Options**
- Portability and Conversion Option
- Retiree Continuation Option

**Other Features**
- Seatbelt/Air Bag Incentive
- Nonsmoker
- Childcare Benefit
- Education Benefit
- Coma Benefit

**Notes:**
- Increases may not exceed one step during Open Enrollment. If you experience a qualifying life event during the year, you may elect any coverage option.
- Option A: 1x annual salary
- Option B: 2x annual salary
- Option C: 3x annual salary
- Option D: 4x annual salary
- Option E: 5x annual salary
- If you experience a qualifying life event during the year, you may elect any coverage option.

*Covered levels automatically adjust for age and changes in salary.*

The University retains 1.5% of the Aetna premium to cover administrative costs.
Disability Insurance

Long-Term Disability Plans

Long-term disability (LTD) insurance is a form of income protection that provides you with a portion of your salary in the event of a disabling illness or injury. If you become disabled, there is a six-month waiting period before you qualify for LTD benefits.

Enrollment in LTD is automatic and mandatory as part of your retirement plan. Your provider is dependent upon the retirement plan (either ASRS or ORP) you are participating in at the onset of disability. Coverage begins the day your retirement plan becomes effective.

There is a waiting period of six consecutive months during which you must be continuously and totally disabled before long-term disability benefits begin.

Generally, the monthly benefit is 66.67% of your basic monthly earnings. Employees enrolled in the ORP have a maximum benefit of $10,000 per month.

Long-term disability benefits can be paid until age 65 or until you are able to return to work, as determined by the vendor and medical documentation.

Short-Term Disability Plans

Short-term disability (STD) insurance covers the period before you are eligible for LTD benefits. STD pays a percentage of your salary if you are unable to work for up to six months due to a non-work-related accident or illness, or in the event of a pregnancy. STD is voluntary, and you pay the entire premium on an after-tax basis.

The University offers STD through Unum. ADOA offers STD through MetLife. You may only elect one of these two options. Be sure to compare the plan features carefully, as there are some important differences in benefits, particularly regarding pregnancy and offsets for other income sources. You can use the Benefits Calculators on the Human Resources website to calculate the premium cost.

For more information

Unum Certificate of Coverage
STD Comparison Video
# SHORT-TERM DISABILITY PLAN RATES AND COMPARISON

<table>
<thead>
<tr>
<th>UNUM</th>
<th>MetLife</th>
</tr>
</thead>
</table>
| **Monthly cost:** | $0.77 per $100 of salary  
   After-tax deduction  
   Benefits are tax-free | **Monthly cost:** | $0.31 per $100 of salary  
   After-tax deduction  
   Benefits are tax-free |
| **Maximum Payment Duration:** | 26 weeks | **Maximum Payment Duration:** | 26 weeks from date of disability.  
   If there is a waiting period, maximum duration could be 18 or 22 weeks. |
| **Pays weekly benefit of lesser of:** | 70% of base weekly earnings or $750 (Option A max. salary $55,714)  
   $1,500 (Option B max. salary $111,430)  
   $2,000 (Option C max. salary $148,571) | **Pays weekly benefit of lesser of:** | 66.67% of base pay or $897.43  
   Minimum benefit payment of $673.1 |
| Benefits are not offset by any other payments such as sick or vacation leave. | Benefits payments are offset by sick leave and vacation leave payments. You cannot collect full disability benefits and sick or vacation pay at the same time. | Benefits begin on  
   First day if hospitalized for at least 24 hours.  
   First day for outpatient surgery.  
   31st day if not admitted to hospital. | Benefits begin on  
   First day if disability is due to an accident.  
   31st day if disability is due to illness or pregnancy. |
| **Benefits for pregnancy:** | Six weeks paid for normal birth, eight weeks for C-section. | **Benefits for pregnancy:** | Benefits for pregnancy pay from the 31st day through 42nd day after birth for normal delivery or through 56th day for C-section.  
   No pregnancy benefits for the first 12 months if you elect coverage after your initial new hire/eligibility enrollment period.  
   Periods of disability due to the same cause count as one period unless separated by 60 days or more.  
   Periods of disability due to the same cause count as one period unless separated by 6 months or more. |
| Pregnancy is not a pre-existing condition. | Pregnancy complication is a pre-existing condition. | **Return to Work:** | Partial benefits if working less than full time  
   The University retains 3% of the UNUM premium to cover administrative costs. |
| Pre-existing condition exclusion for first six months after initial election or after option level increase. | No pre-existing condition exclusion. | | |
Discount Programs

Home & Auto Insurance

A voluntary Auto and Homeowner’s Group Discount Insurance Program is available with Liberty Mutual Insurance Company or Travelers, two of the nation’s leading auto and home insurance carriers. Auto, homeowners, renters, condominium, and umbrella coverages are available. You may enroll in this discount program at any time. If you are already insured with one of these providers, contact your agent to request a University discount.

You may pay your home and auto premiums by payroll deduction, by electronic funds transfer from your checking account, or by direct billing to your home. You may receive an extra discount by electing to pay your premium through payroll deduction.

To apply, request a quote, or set up a payroll deduction, contact Travelers at 888-695-4640 or Liberty Mutual at 800-531-8201.

Perks at Work

Perks at Work is a corporate discount program offering discounts and special offers when online shopping with more than 30,000 retailers. For each purchase you earn WowPoints, which you can apply for additional discounts on future purchases, turn into virtual gift cards, or transfer to a PayPal account. Discounted pet insurance is available through Perks at Work. Visit perksatwork.com to register.

Other Discounts

As a University faculty or staff member with a CatCard and NetID, you are eligible for a multitude of perks and discounts on campus, ranging from free tech support and minimal cost software upgrades to free museum admission and discounted tickets for UAPresents performances. Many local merchants, especially those close to campus, also offer discounts if you show your CatCard. Generally, advertised student discounts are also available to employees with CatCards. More information is available here.
**How Benefits & Other Deductions Affect Your Paycheck**

Your insurance premiums, retirement contributions, parking permit costs, and certain other expenses are automatically deducted from your paycheck.

**Pretax and Post-Tax Benefits Deductions**

Certain payroll deductions are pretax and others are post-tax. Pretax deductions are taken from your gross pay before taxes are calculated, thereby reducing your taxable income. Post-tax deductions are taken after taxes are determined. Your paycheck detail will list pre- and post-tax deductions separately.

### PRETAX AND POST-TAX BENEFITS DEDUCTIONS

<table>
<thead>
<tr>
<th>Pretax Deductions</th>
<th>Post-tax Deductions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical, dental, and vision insurance for yourself and your dependents*</td>
<td>Supplemental life insurance premiums over $35,000 of coverage</td>
</tr>
<tr>
<td>Flexible spending account contributions</td>
<td>Life insurance for your dependents</td>
</tr>
<tr>
<td>Retirement plan contributions</td>
<td>Long-term disability insurance</td>
</tr>
<tr>
<td>Supplemental life insurance premiums up to $35,000 of coverage</td>
<td>Short-term disability insurance</td>
</tr>
<tr>
<td></td>
<td>Auto/home insurance</td>
</tr>
<tr>
<td></td>
<td>Medical, dental, and vision insurance for anyone who does not qualify as your tax dependent*</td>
</tr>
<tr>
<td></td>
<td>Parking permit</td>
</tr>
</tbody>
</table>

*If you are insuring a domestic partner or a child(ren) of a domestic partner, they may not qualify as dependents for tax purposes. To determine who qualifies as your tax dependent(s), please refer to IRS Bulletin 2008-2, Notice 2008-5 “Qualifying Relative for Purposes of Section 152(d)(1).” For more information, consult a tax professional.
Imputed Income

Dependents you cannot claim on your federal income tax return are referred to as “non-tax-qualified dependents.” The IRS considers the University’s contribution toward insurance coverage for a non-tax-qualified dependent (such as a domestic partner or the child of a domestic partner) as your imputed income. Imputed income increases your taxable gross income, and is subject to federal and state income taxes and FICA (Social Security and Medicare) taxes. To determine if your domestic partner or your domestic partner’s children qualify as your tax dependents, please refer to IRS Bulletin 2008-2, Notice 2008-5 “Qualifying Relative for Purposes of Section 152(d)(i).”

The portion of the premium you pay through payroll deduction for yourself and the dependents you can claim on your federal income tax return is taken from your paycheck on a pretax basis (before taxes are deducted). However, the portion of the premium you pay through payroll deduction for dependents you cannot claim on your federal income tax return is taken from your paycheck on a post-tax basis (after taxes are deducted).

Imputed income is reported on your annual W-2 Form and is not included in the amount used to calculate your income tax withholding rate.

**Employee Plus Domestic Partner Coverage Example**

If you enroll in Employee + Adult coverage for yourself and your non-tax-qualified domestic partner, you have to pay taxes on the difference between the University’s contributions for the Employee + Adult coverage tier on the Alternative Plan and what Employee-only coverage would cost on that plan.

<table>
<thead>
<tr>
<th>Monthly employer contribution for Employee + Adult tier</th>
<th>$1,015.62</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly employer contribution for Employee-only tier</td>
<td>$502.52</td>
</tr>
<tr>
<td><strong>Difference</strong></td>
<td><strong>$513.10 per month</strong> (Employer contribution for domestic partner)</td>
</tr>
</tbody>
</table>

Based on this calculation, your imputed income (additional taxable income) is $513.10 per month, or $6,157.20 per year.
Family Coverage Example
If you enroll in Family coverage for your tax-qualified child and your non-tax-qualified domestic partner, you will have to pay taxes on the difference between the University’s contributions for Family coverage on the Alternative plan, and what Employee + Child coverage on that plan would cost.

<table>
<thead>
<tr>
<th>Employer contribution for Family tier</th>
<th>$1,478.24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer contribution for Employee + Child tier</td>
<td>– $981.22</td>
</tr>
<tr>
<td>Difference</td>
<td><strong>$497.02 per month</strong> (Employer contribution for domestic partner)</td>
</tr>
</tbody>
</table>

According to the chart, your imputed income (additional taxable income) is $497.02 per month, or $5,964.24 per year.

Premium Deductions for Nine-Month Employees Paid over the Academic Year

If you are paid over the nine-month academic year and do not receive paychecks during the summer, insurance premiums for your summer coverage are pre-collected during the spring semester. The pre-collected amounts are evenly distributed throughout most of the pay periods in the spring semester. You can find the amounts on the Human Resources website.

If you are hired during the spring semester, all missed pre-collected premiums will be collected in a lump sum from your first available paycheck after your benefit elections are effective.
Qualified Tuition Reduction

Qualified Tuition Reduction (QTR), a benefit offered by ABOR, allows full-benefits-eligible employees and official retirees of the three state universities, along with their qualifying dependents, to take credit-bearing courses at reduced tuition costs. QTR is reciprocal among the University of Arizona, Arizona State University, and Northern Arizona University—so you and your dependents can use the benefit for regular or online courses at any of the three universities.

If you wish to take courses that meet during your regular work hours, you can discuss your options with your supervisor.

Eligibility

You must be a qualifying employee on the first day of any semester or session in which you plan to use this benefit.

Employees who are employed at .5 FTE or greater (20 hours per week) for a period of six months or longer, along with University retirees with Official Retirement Status and former employees on LTD, may use QTR. Some University affiliates may also receive QTR. Find information about qualifying affiliates on the Division of Human Resources website.

QTR benefits also extend to spouses and dependent children of employees, retirees, former employees on LTD, and some affiliates. The surviving spouse and dependent children of a deceased University employee may also be eligible.

A dependent child is defined as a biological, step, adopted, or foster child younger than age 30 who is either a qualifying child or a qualifying relative under IRS regulations. IRS regulations prohibit children age 24 or older from receiving tuition reduction in any calendar year in which they make more than $4,200. If your child earns more than that amount, the tuition reduction must be retroactively removed. The University is required to conduct random audits to ensure dependent eligibility.
Domestic Partner Tuition Program

The University Domestic Partner Tuition Program (DPTP) allows domestic partners and their children to receive tuition reductions on the same terms as QTR. DPTP can only be used at the University of Arizona. A Qualified Domestic Partner Affidavit is required for eligibility.

Tuition Reduction Rates

Employee & Spouse/Domestic Partner: You and your spouse/partner may register for up to nine credits in Fall and Spring semesters for $25.00. During Summer and Winter sessions you may register for up to six credits at that rate. Additional credits above these cutoffs are billed at the regular in-state tuition rate. Domestic partners receive the same reduction in University tuition under the DPTP.

Dependent Children: Your dependent children pay 25% of the resident tuition rate at whichever state university they attend. Your domestic partner’s dependent children may attend the University of Arizona at this reduced rate. QTR/DPTP only applies to tuition and not to any laboratory or course fees.

Taxation of the QTR Benefit

Undergraduate Tuition: If you use the QTR benefit for undergraduate tuition for yourself or your dependent, the benefit amount is not taxable.

Graduate Tuition: For University employees who are taking graduate courses, tuition benefits over $5,250 are taxed as income, and tax liability is withheld by Payroll. If spouses or dependents are using tuition reduction for graduate courses, the full tuition benefit amount is taxable, and is taxed and withheld through Payroll.

For the DPTP program, any benefit amount for domestic partners or children of domestic partners is awarded on students’ Form 1098-T as if they received a scholarship. The amount of the DPTP benefit is not taxed through Payroll.

Consult a tax advisor regarding tax liabilities.
Paid Time Off

Employees who are employed at .5 FTE or greater (20 hours per week) for a period of at least six months are eligible for sick time and the following paid leaves. To view your accrued paid time off, go to UAccess Employee; either view your paycheck stub under the “Payroll & Compensation” tile, or click the “Time” tile and open the “Leave Balances” tab. Vacation and sick leave accruals begin at date of hire.

Paid Vacation/Annual Leave

University staff and academic professionals earn annual paid vacation leave on a prorated basis according to their work schedule. Full-time eligible employees on fiscal-year appointments accrue 22 workdays per year. Employees on nine-month schedules receive prorated vacation leave during the months they are at work.

Faculty on academic-year appointments do not accrue paid vacation leave. Those on fiscal-year appointments accrue 22 days per year.

Postdoctoral scholars earn 10 days of vacation in the first year and 15 days of vacation beginning in the second year.
**Vacation Carryforward**

All employees may carry forward 1.5 times the vacation hours they earn in one year to the following year.

Employees, except for postdoctoral scholars, who leave University employment, or who transition from a benefits-eligible to a non-benefits-eligible position receive a lump sum payout for their vacation balance up to the amount earned in one year. Postdoctoral scholars do not receive a payout upon termination.

**Paid Sick Leave**

Employees who are employed at .5 FTE or greater (20 hours per week) for a period of at least six months are eligible to accrue sick time. Employees at 1.0 FTE earn eight hours of sick time each month (12 days per year). This accrual is prorated for employees working less than full time. Employees who work less than 12 months accrue sick time only during the months they are working.

Sick time may be used for an illness, injury, or healthcare-related appointment for the employee, the employee’s immediate family, or an established member of the employee’s household.

Sick time is not paid out upon termination of employment. However, the State of Arizona offers a Retiree Accumulated Sick Leave (RASL) payout to individuals who retire with at least 500 hours of accrued sick time. Information on RASL can be found on the Road Ahead website.
Paid Parental Leave

The University offers up to six weeks of paid parental leave following the birth or adoption of a child.

This leave is available to parents who:

- Are full benefits-eligible
- Have been employed by the University for at least 12 continuous months immediately prior to the commencement of the requested leave. (For employees on nine-month academic-year schedules, the summer months between academic years apply toward the 12 months of continuous employment.)

Parental Leave is designed to run concurrently with Family and Medical Leave (FML). It is not designed to extend the 12-week FML period.

When both parents are University employees who meet eligibility guidelines, each is entitled to six weeks of parental leave. Please review the Parental Leave policy.

If you accept paid parental leave, you agree to return to work for at least 30 days after your approved leave. If you do not return to work, you must reimburse the University for the salary and benefits you received during parental leave. This reimbursement requirement can be excused if your reason for not returning is related to your or your child’s serious health condition.
Bereavement Leave

Employees can take three paid workdays off for a death in the family. If the employee is arranging for or attending funeral services out of state, five days may be taken. Sick time may be used to extend the leave or for a relative who does not qualify under the definition of family.

Jury Duty Leave

Employees can receive paid time off if they serve as a jury member or material witness (except as a plaintiff or defendant). If you accept jury duty leave, you must remit any payment you receive from the court to the University.

Holidays

The University observes 10 paid holidays a year. Normally these are:

- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day and the day after
- Christmas Eve and Christmas Day
- New Year’s Day
- Martin Luther King Jr. Day
- Memorial Day

The holiday calendar is posted on the Human Resources website.
University Closure

The University closes between Christmas Eve and New Year’s Day, and employees receive holiday pay and university closure pay during this time.

Based on critical need, some departments may stay open, or certain employees within a department may need to remain at work. Employees who are required to work during closure receive a corresponding number of paid days to use before the end of the fiscal year.
Life & Work Connections

Life & Work Connections is dedicated to increasing resiliency, workplace effectiveness, and productivity for employees and the University. Life & Work Connections staff can help identify, design, and provide specialized services to address a variety of needs.

- **Employee Assistance Services** provides individual counseling and departmental consultation services related to a variety of personal and workplace issues. Group presentations are also available by request.

- **Employee Wellness & Health Promotion** offers presentations and activities, such as flu shots, worksite wellness health screenings, and individual nutrition/fitness coaching for employees in support of wellness goals.

- **Childcare and Family Resources** provides a broad spectrum of information, referral, financial, educational, and sick and back-up childcare services to employee and student parents with current or anticipated childcare and parenting issues. Through the Childcare Choice Program, benefits-eligible employees (and students) may apply for up to $2,000 annually toward the cost of work-related childcare.

- **Elder Care and Life Cycle Resources** offers information, referral, and educational services for employees and students who have, or anticipate having, elder care and family caregiving issues.

- **Work/Life Integration** offers resources for employees and departments on current issues and emerging trends, such as lactation resources and alternative work arrangements. Professional consultation and advisement services, with support from campus partners, are available on the dynamics of work/life balance and their campus implications.

**CONTACT LIFE & WORK CONNECTIONS**
715 N. Park Ave. (2nd Floor)
520-621-2493
Legal Notices

All required legal notices for ADOA insurance plans are posted on the Benefits Options website.

Summaries of Benefits and Coverage and Uniform Glossary for ADOA Plans

Summary of Benefits and Coverage for University Alternative Plan

The federal government requires the disclosure of the Summary of Benefits and Coverage (SBC) and Uniform Glossary under the ACA. Group health plans and health insurance issuers offering coverage for groups and individuals must provide access to the SBC and Uniform Glossary.

Health Insurance Marketplace Notice

Key parts of the health care law (ACA) allow you to buy health insurance through the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, a notice that provides some basic information about the new Marketplace and the Benefit Options health coverage is available.

Health Insurance Portability & Accountability Act (HIPAA)

This notice protects the privacy of individually identifiable health information, and establishes who can use the personal health information and how it can be used.

HIPAA Special Enrollment Rights Notice

This notice provides information regarding special enrollment. You may be able to enroll in the Benefit Options health plan without waiting for the next open enrollment period if you request a QLE change within 31 days of an event for loss of other coverage or for birth, adoption, or placement for adoption of a child. In addition, you may enroll if you become eligible for a state premium assistance program under Medicaid or CHIP.

Medicare Notice of Creditable Coverage

This notice has information about the prescription drug coverage through the Benefit Options program for participants with Medicare. It explains the options you have under Medicare prescription drug coverage (Medicare Part D) and can help you decide whether or not you want to enroll.
Consolidated Omnibus Budget Reconciliation Act

Notice of the Arizona Benefit Options Program COBRA Coverage. This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan.

Patient Protection & Affordable Care Act (PPACA)

Notices of the Arizona Benefit Options Program in reference to PPACA.

Women’s Health and Cancer Rights Act (WHCRA)

This notice describes mandated benefits for mastectomy-related services, informs you that services are available for such treatment and services, including reconstructive surgery, prosthesis, and lymphedema treatment, and explains how to obtain a detailed description of the mastectomy-related benefits under the Plan.

Newborns’ and Mothers’ Health Protection Act of 1996

This notice is in regard to federal law, which states health plans and issuers may not restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child for prescribing a length of stay not in excess of 48 hours (or 96 hours). The plan may not require that a provider obtain authorization from the plan for prescribing the minimum length of stay.

Wellness Program

This notice requires employers offering wellness programs collecting employee health information to inform employees what information will be collected, how it will be used, who will receive it, and what will be done to keep it confidential.

Notice of Nondiscrimination

Benefit Options complies with applicable federal civil rights laws and does not discriminate, exclude, or treat people differently based on their race, color, national origin, sex, age, or disability.