

welcome

Each of Idaho's outdoor recreational pastimes has a season, and the University of Idaho's annual enrollment for benefits has its season, too, and it's here!

You may enroll for your 2014 benefits between October 14 and November 9, 2013; they start on January 1, 2014.

Because the benefits you and your family need are so important and so personal, we encourage you to review this guide carefully so that you choose the plan that best fits your lifestyle.

Here are a few things you may want to pay particular attention to:

- Employee Assistance Program. The University's rich EAP provides traditional offerings, such as personal and career counseling. But did you know it also offers many professional and leadership development webinars, assessments and skill builders? See page 18.
- Mail order prescription drugs. If you take recurring medication, getting them by mail is convenient no more trips to the pharmacy and usually less expensive than buying them from a retail pharmacy. See page 11.
- Spending accounts. If you want to continue or start a Health Savings Account, Health Care Flexible Spending Account or Dependent Care Flexible Spending Account, you must make this choice during annual enrollment. See page 16.
- Health care reform. While the Affordable Care Act's individual mandate starts January 1, portions of the law have been in effect since 2010. We've made changes to our health coverage to comply with the law.



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adventure checklist

Before heading out on a backpacking trip, you'd likely make a list of everything you need; there's nothing worse than being in the middle of nowhere and discovering you forgot matches to light a fire.

Your enrollment checklist is something like that. While this guide is an overview of our plans, your personalized enrollment information is available on VandalWeb. When you know what you want to take on your "enrollment journey," you can choose all your options online.

- Log on to the **VandalWeb** portal; click on the Employee Menu tab.
- 2. Under Benefits label, click on myBenefits.
- 3. Click on Annual Enrollment on your benefit To Do List. Complete the entire enrollment (remember the backpacker with no matches).
- 4. Check your personal (name, address, etc.) and beneficiary information, and make necessary changes.
- 5. Review the confirmation statement.
- 6. If anything is incorrect, call the University of Idaho Benefits Center immediately at 208-885-3697 or 800-646-6174.
- Complete any evidence of insurability forms (see page 15).



More than 6 in 10 people walk for transportation or for fun, relaxation or exercise — or just to walk the dog.

Source: Centers for Disease Control and Prevention



changes in latitudes

Even when the wind in your sails seems just right, sometimes you need to come about to catch that perfect breeze. To that end, we're always looking for ways to improve our health plans. For 2014, we've made just a few changes.

HEALTH CARE REFORM

Since 2010, we've been making changes to our health coverage to comply with the Affordable Care Act (ACA).

EXPANDED ELIGIBILITY

If you work at least 30 hours a week in a non-Board of Regents-appointed position or you teach at least 10 credit hours a semester as a temporary faculty member or lecturer, you may participate in the University's unsubsidized benefits plan.

If you have questions about these new expanded eligibility rules, contact the University of Idaho Benefits Center.

WHY EXPAND ELIGIBILITY?

The ACA's "individual mandate" requires all Americans to have health insurance starting January 1, 2014. Because of this law, we're now offering health insurance to employees who weren't eligible before.

Starting in 2014, the government will charge anyone without health insurance a tax penalty (see page 5).

In addition to University-provided health benefits, all employees may shop for health insurance through the new ACA health insurance marketplace.

IS THE HEALTH INSURANCE MARKETPLACE RIGHT FOR ME?

That depends, in part, on whether you qualify for University health benefits and if the University pays a portion of your benefits.

All University employees may buy health insurance through the marketplace. We encourage you to check it out.



BOARD OF REGENTS-APPOINTED FULL-TIME EMPLOYEES

BOARD OF REGENTS-APPOINTED HALF- AND 34-TIME EMPLOYEES

- Eligible for the University's subsidized benefits plan.
- The University will pay a portion of your health care contribution.
- When you pay for coverage through the University, your contributions are "pre-tax," which reduces the amount of income tax you pay.

Even if you meet the ACA's income requirements, you won't qualify for tax credits or subsidies to help you pay for coverage offered on the marketplace.

If you meet the ACA's income requirements, you may qualify for tax credits or subsidies to help you pay for coverage offered on the marketplace.

NON-BOARD OF REGENTS-APPOINTED EMPLOYEES WHO WORK AT LEAST 30 HOURS A WEEK OR **TEACH AT LEAST 10 CREDITS**

- Eligible for the University's unsubsidized benefits plan.
- · You must pay the full cost of your health care coverage.
- The University won't pay any of your benefits.
- When you pay for coverage through the University, your contributions are "pre-tax," which reduces the amount of income tax you pay.
- If you meet the ACA's income requirements, you could receive tax credits or subsidies to help you pay for coverage.

If you buy insurance through the marketplace, you'll pay for coverage with after-tax dollars.



You may qualify for tax credits or subsidies through the marketplace if you are a University employee who:

- Is Regents Board-appointed and works half time or three-quarter time
- Is not Regents Board-appointed and works fewer than 30 hours a week
- Is not Regents Board-appointed and is a temporary faculty member who teaches fewer than 10 credit hours hours a semester

You may be able to get health coverage through other sources such as:

- Your spouse's employer
- · Parent's plan, if you're under age 26
- Medicaid, depending what state you live in and your income level
- · Military or Veterans Administration

WHERE CAN I LEARN MORE ABOUT THE MARKETPLACE?

In Idaho, visit www.getcoveredidaho.com. If you live outside Idaho, visit www.healthcare.gov.





IMPORTANT

What will you pay if you don't have health insurance?

With few exceptions, Americans who don't have health insurance starting January 1, 2014, will have to pay the government a tax penalty.

- In 2014, the annual penalty is \$95
 per uninsured adult or 1 percent of
 your household income, whichever
 is more
- In 2015, \$325 per uninsured adult or 2 percent of your household income, whichever is more
- In 2016, \$695 per uninsured adult or 2.5 percent of your household income, whichever is more

the put-in

Every river trip starts at the place you put your canoe into the water. Once you and your fellow paddlers are on board, your journey begins.

The put-in point for annual enrollment starts with eligibility. Most University employees are eligible for benefits. Read this section to find out if you, your spouse, other adult or dependents are eligible.

WILLO'S FLICIPLE	MUST WORK AT LEAST 30 HOURS A WEEK OR TEACH AT LEAST 10 CREDITS PER SEMESTER
WHO'S ELIGIBLE ¹	REQUIREMENTS
	A regular full-time, three-quarter-time, or half-time Board of Regents-appointed employee,
	Assigned to work at least 20 hours a week, and
You	Working on an appointment lasting at least five consecutive months
iou	Non-Board of Regents-appointed employees (eligible for unsubsidized medical and RX benefits only)
	You work at least 30 hours a week, or
	You teach at least 10 credits per semester as a temporary faculty member or lecturer
	Your legal spouse, including same-sex spouse,
	or
Your spouse	A common law union that began in Idaho before January 1, 1996, or
	A common law union that is valid in another state and recognized by Idaho
	Upon request, you must provide a marriage certificate
	Age 18 or older and mentally competent to consent, and
	Not legally married, and
	Living in your household for the six months before you enroll in benefits
Other alimible adult?	Upon request, you must provide at least two of these documents:
Other eligible adult ²	• A joint mortgage, lease or other evidence of common residence, such as joint utility bills
	Durable property or health care power of attorney
	Joint bank or credit card account
	• Designation of each other as the primary beneficiary in a will, life insurance policy or retirement plan
	Biological child
	Legally adopted child or child placed with you for adoption
Children under ess 203	Stepchild
Children under age 26 ³	Child for whom you are the legal guardian
	Child of a qualified other eligible adult who lives with you, or
	Child who must be covered by a Qualified Medical Child Support Order

^{1.} Coverage begins on the first day of the month after your employment begins. If you begin employment on the first day of the month, your coverage begins that day.

^{2.} Federal tax law requires you to pay federal income and Social Security taxes on the full value of coverage for an eligible adult and their children unless they qualify as your tax dependents (www.irs.gov). The value of the coverage is reported as imputed income on your W-2. For more information, visit www.uidaho.edu and go to annual enrollment, or call 208-885-3638.

^{3.} Coverage will end on your child's 26th birthday unless he or she can't self-support because of a physical or mental disability that began before age 26. You must apply for this continuation within 31 days from the date of their 26th birthday.



DEPENDENTS WHO ARE UNIVERSITY EMPLOYEES

If your spouse/domestic partner is employed in a benefits-eligible University position, you have two options:

- One of you must waive medical coverage and be covered as a dependent spouse of the other; or
- You may each enroll in employee-only coverage.

Dependent children may only be covered under one plan.

MAKING MIDYEAR BENEFIT CHANGES

Be sure to choose your benefits wisely because most of your benefits are locked in for the calendar year. You can't change your elections during the year unless you:

- Have a qualified change in status, such as getting married or having a baby
- Qualify for a special enrollment because you or your spouse lose a job or eligibility for other health insurance.

Enrollment begins on the date of the event. For example, if you get married on June 30 and add your spouse to your coverage within 30 days from that date, your spouse's coverage begins on the day you got married.

Changes must be consistent with the event. For example, if your child no longer qualifies as an eligible dependent, you may drop their coverage, but you can't drop the coverage for other dependents until the next annual enrollment period.

You have 30 days to make changes for most events. You have 60 days to make changes in the event of a birth or adoption of a child.

For more information on midyear changes, review your Summary Plan Description at www.uidaho.edu/benefits/forms.



setting up camp



Do you like to camp in Idaho's great outdoors? If so, you probably start by choosing a campsite. Do you prefer a primitive, quiet site for more of a wilderness experience, or a developed campground with a few modern conveniences?

While both offer an outdoor getaway, you get to choose the experience. The University offers two Blue Cross of Idaho health plans so that you can choose the one that is best for you and your family:

- **Standard PPO**
- High-deductible Health Plan (HDHP) with Health Savings Account



BOARD OF REGENTS-APPOINTED EMPLOYEES: FULL-TIME PER PAY CONTRIBUTIONS FOR 2014

WHO'S COVERED	STANDARD PPO	HDHP WITH HSA
You	\$56.75	\$24.99
You + spouse or other eligible adult*	\$119.18	\$52.48
You + child	\$79.46	\$34.99
You + children	\$120.31	\$52.98
You + family (spouse or other eligible adult + children)*	\$160.04	\$70.47

NOT BOARD OF REGENTS-APPOINTED EMPLOYEES: PER PAY CONTRIBUTIONS FOR 2014

WHO'S COVERED	STANDARD PPO	HDHP
You	\$215.47	\$183.71
You + child	\$301.66	\$257.19
You + children	\$456.80	\$389.47

CHOOSING YOUR BENEFITS

Campsites share many of the same features but each one has unique qualities. It's the same with our two health plans. Shared features:

- Each plan pays 100 percent of in-network preventive care (annual exam, mammograms, colonoscopies, etc.)
- You may visit any provider but you'll pay less when you visit an in-network provider
- You may enroll in a Dependent Care Flexible Spending Account.

UNIQUE FEATURES			
STANDARD PPO HDHP WITH HSA			
 Copayment required for doctor office visits until you reach the out-of-pocket maximum. 	 You pay 100 percent of covered health care expenses until you satisfy annual deductible. 		
 For all other covered services, you must satisfy the deductible and then pay coinsurance until you satisfy the out-of-pocket maximum. 	 Then, you pay coinsurance for covered services until you satisfy the out-of-pocket maximum. You may participate in a Health Savings Account. See page 16. 		
 May participate in the Health Care Flexible Spending Account. See page 16. 			

^{*} Federal tax law requires you to pay federal income and Social Security taxes on the full value of coverage for an eligible adult and their children unless they qualify as your tax dependents (www.irs.gov). The value of the coverage is reported as imputed income on your W-2. For more information, visit uidaho.edu and go to annual enrollment, or call 208-885-3638.

MEDICAL PLAN COVERAGE AT-A-GLANCE

This table summarizes what you pay for some medical services under the two plans.

	STANDARD PPO		HDHP WITH HSA	
	IN-NETWORK	OUT-OF-NETWORK	IN- AND OUT-OF-NETWORK	
Annual deductible				
Individual	\$400	المناطنة المائية	\$1,500	
Family	\$1,200	\$600 per individual	\$3,000	
Out-of-pocket maximum (Or plan pays 100% of covered so		nsurance where applicable until the out-of-	-pocket maximum is satisfied, then the	
Individual	\$3,600	د د د د د د د د د د د د د د د د د د د	\$3,100	
Family	\$10,800	\$5,200 per individual	\$6,200*	
Total annual cost exposure (c	deductible plus out-of-pocket maximum)			
Individual	\$4,000 and prescription drug deductible and copayments	\$5,800 per individual	\$4,600	
Family	\$12,000 and prescription drug deductible and copayments	Prescription drug deductible and copayments	\$9,200	
Preventive care				
Preventive care/wellness services	You pay nothing; plan pays 100%	Not covered	You pay nothing; plan pays 100% of the maximum allowance	
Office visits (you pay)				
Primary care office visits	\$25 copayment per visit,	35% of the maximum allowance,	30% of the maximum allowance,	
Specialist care office visits	not subject to deductible	after the deductible	after the deductible	
Non-physician services, such as labwork, imaging, etc.	20% of the maximum allowance, after the deductible	35% of the maximum allowance, after the deductible	30% of the maximum allowance, after the deductible	
Behavioral health benefits (y	ou pay)			
Inpatient services	20% of the maximum allowance, after the deductible and \$100 per day copayment up to \$300 per year	35% of the maximum allowance, after the deductibleand \$100 per day copayment up to \$300 per year	30% of the maximum allowance, after the deductible	
Outpatient psychotherapy services	\$25 copayment per visit, not subject to the deductible	35% of the maximum allowance, after the deductible	30% of the maximum allowance, after the deductible	
Hospital benefits (you pay)				
Emergency services	20% of the maximum allowance, after the deductible	20% of the maximum allowance, after the deductible	30% of the maximum allowance, after the deductible	
Inpatient	20% of the maximum allowance, after deductible and \$100 per day copayment, up to \$300 per year	You pay 35% of the maximum allowance, after deductible and \$100 per day copayment up to \$300 per year	You pay 30% of the maximum allowance, after deductible	
Outpatient	20% of the maximum allowance, after deductible	You pay 35% of the maximum allowance, after deductible	You pay 30% of the maximum allowance, after deductible	
Maternity services (you pay)				
Physician services	\$250 copayment, then plan pays 100% (not subject to deductible or coinsurance)	35% of the maximum allowance, after	200/ of the marine and all arms	
Hospital services	20% of the maximum allowance, after the deductible and \$100 per day copayment up to \$300 per year	deductible and \$100 per day copayment up to \$300 per year	30% of the maximum allowance, after the deductible	

^{*} When your family has satisfied the \$3,000 deductible, you pay coinsurance for covered services for all family members. If one family member's covered services satisfy the \$3,100 individual embedded out-of-pocket maximum, the plan will pay 100 percent for all covered services for that family member. When any combination of family members' covered services satisfies the overall \$9,200 family out-of-pocket maximum, the plan pays 100 percent of covered services for all family members for the remainder of the calendar year.

There is a separate bariatric surgery deductible of \$1,500.

COMPARING PLANS

When you looked at tents to buy for your camping trip, you probably found a couple that you really liked, but you had to make tradeoffs based on your needs, situation and priorities. Both health plans may have features that fit your lifestyle. If you're having trouble deciding, the scenarios below show approximate out-of-pocket expenses under each plan.

Meet Robin — Employee only

Robin is a healthy, active twentysomething. During the year, she will:

- get an annual physical
- visit her family doctor once
- need two prescriptions

Because Robin doesn't need much medical care, she won't meet her annual deductible. Under each of the medical options using in-network providers, Robin will pay approximately:

	STANDARD PPO	HDHP WITH HSA
Annual medical plan contributions	\$1,476	\$650
Participant HSA Fund contributions	\$0	\$1,000
Out-of-pocket costs:		
Annual exam – preventive	\$0	\$0
Family doctor visit	\$25	\$85
• Prescriptions	\$353	\$600
HSA account reimbursement of participant contributions	\$0	-\$685
University HSA matching contributions	\$0	-\$500
HSA rollover amount	\$0	-\$315
TOTAL ANNUAL COST*	\$1,854	\$835

^{*}Includes HSA rollover amount of \$315.

Meet Christopher and Maria — Employee + spouse

Christopher and Maria are in their early 50s. They both get annual physical exams. Christopher had a diagnostic colonoscopy (not preventive) and Maria, a preventive mammogram. In May, Christopher suffered a heart attack requiring bypass surgery.

Christopher takes cholesterol medication. Maria takes medication for her thyroid.

Under each medical plan option using in-network providers, Christopher and Maria will pay:

	STANDARD PPO	HDHP WITH HSA
Annual medical plan contributions	\$3,099	\$1,364
Participant HSA Fund contributions	\$0	\$2,000
Out-of-pocket costs:		
Annual exams – 2 preventive	\$0	\$0
Mammogram – preventive	\$0	\$0
Colonoscopy – diagnostic	\$920	\$3,000
 Heart attack requiring bypass surgery – 4 days inpatient stay and inpatient surgery 	\$3,080	\$3,100
• Prescriptions	\$874	\$720
HSA account reimbursement of participant contributions	\$0	-\$2,000
University HSA matching contributions	\$0	-\$1,000
HSA rollover amount	\$0	\$0
TOTAL ANNUAL COST	\$7,973	\$7,184

Meet the Smiths — Employee + family

Kevin and Stacey are in their mid-30s with a son and daughter, ages 5 and 8. They are expecting a baby this year.

Each person gets an annual checkup. The youngest child had two urgent-care visits for ear infections. The family will need four prescriptions this year, which they fill through the mail-order service.

Under each of the medical options using in-network providers, Kevin and Stacey will pay:

	STANDARD PPO	HDHP WITH HSA
Annual medical plan contributions	\$4,161	\$1,832
Participant HSA Fund contributions	\$0	\$2,000
Out-of-pocket costs:		
Annual exams – 4 preventive	\$0	\$0
• Prenatal care – 6 doctor visits	\$150	\$600
• Urgent care – 2 visits	\$400	\$400
Hospital stay – 2 days	\$2,520	\$4,400
• Prescriptions	\$377	\$300
HSA account reimbursement of participant contributions	\$0	-\$2,000
University HSA matching contributions	\$0	-\$1,000
HSA rollover amount	\$0	\$0
TOTAL ANNUAL COST	\$7,608	\$6,532

fixing a flat



If you're a mountain bike rider, you know many things can flatten even the best-maintained tire. Fortunately, patching it is easy if you have the right tools.

To maintain or regain your health, the University's prescription drug program covers long-term medications and those you need when your "tire goes flat."

STRATEGIES FOR SAVINGS

From using generic medicines to setting up mail service for long-term prescriptions, CVS Caremark can help you find the right ways to save.

To save money on your prescriptions:

- Ask for generics first. Generic drugs can cost up to 80 percent less than brand name drugs.
- When you must have a brand name drug, ask your doctor to make sure it's on the "preferred list" because it won't cost as much.
- Order 90-day supplies of ongoing medications. Sign up for the CVS Caremark mail-order service. Medications will ship directly to you with no shipping charge.
- Fill short-term prescriptions at a network pharmacy. Generally, you pay more for short-term (less than 90 days) prescriptions that are filled outside the CVS Caremark retail pharmacy network.





IMPORTANT

Sign up for mail order

Sign up with the CVS Caremark program if you take ongoing prescriptions. You'll save money and you won't have to leave the house to get the prescription filled.

- www.caremark.com/faststart
- Call FastStart at 800-875-0867 5 a.m. – 5 p.m. (PT) Monday – Friday

PRESCRIPTION DRUG COVERAGE AT-A-GLANCE

FEATURE	STANDARD PPO		HDHP WITH HSA	
Prescription drug deductible				
Individual	\$1	\$125		
Family	\$2	250	N/A	
Drug Type	Retail Pharmacy (30-day supply or less CVS Caremark pharmacists)	Mail-order Pharmacy (90-day supply through CVS Caremark Mail Service)	N/A	
Generic	25% \$12 minimum/\$25 maximum	\$36	You pay 100% of the drug's	
Formulary Brand Name	25% \$25 minimum/\$75 maximum	\$75	cost until you satisfy the deductible, and then pay 30%	
Non-formulary Brand Name	25% \$40 minimum/\$100 maximum	\$120	of the maximum allowance	

⁷ If a brand name drug is purchased when a generic is available, you pay the appropriate brand copayment, plus 100 percent of the cost difference between the brand and generic.

sparkle and shine



Nature is filled with light — glittery diamonds of fresh snow, prancing flames in your campfire, a descending fireball in a sable sky — all of which elicit smiles.

Like our medical plan, the University offers two options through Delta Dental to help your smile shine through*. Unlike the medical plan, dental plans remain in effect for two years.

- Standard Dental. 100 percent coverage for preventive care; for comprehensive coverage, see the at-a-glance table.
- Dental Plus. 100 percent coverage for preventive care; for comprehensive coverage, which includes child and adult orthodontia, see the at-a-glance table.
- * Only board-appointed employees are eligible for dental coverage.

IMPORTANT

Finding a Delta dentist

Visit www.deltadentalid.com for a list of current Delta Dental offices.

- · On the homepage, click on Find a Dentist
- · Select Delta Dental PPO as your plan network.

You also may check the status of a claim, email a Delta Dental customer service representative and print your Delta Dental ID card.

FULL-TIME PER PAY CONTRIBUTIONS FOR 2014 DENTAL PLANS

WHO'S COVERED	STANDARD DENTAL	DENTAL PLUS
You	\$0.00	\$2.95
You + spouse or other eligible adult	\$0.00	\$6.61
You + child	\$0.00	\$5.90
You + children	\$0.00	\$11.22
You + family (spouse or other eligible adult + children)	\$0.00	\$11.91

DENTAL PLAN COVERAGE AT-A-GLANCE

WHO'S COVERED	STANDARD DENTAL	DENTAL PLUS			
Annual deductible	Annual deductible				
Individual	\$25	\$50			
Family	\$75	\$150			
Class I benefits					
Diagnostic servicesPreventive servicesX-rays	You pay nothing; plan pays 100%*				
Class II benefits					
 Oral surgical services Endodontic services Periodontic services, including periodontal cleaning Minor restorative services 	You pay 25% of the maximum allowance, after deductible*	You pay 20% of the maximum allowance, after deductible*			
Class III benefits					
Major restorative servicesProsthodontic services	You pay 55% of the maximum allowance, after deductible*	You pay 45% of the maximum allowance, after deductible*			
Class IV benefits					
Adult and child orthodontia (only for services begun after you enrolled in the plan)	None	Plan pays 50%* — up to lifetime maximum orthodontia benefit of \$1,000 per person			
Annual maximum benefit					
The most the plan will pay in a year, excluding orthodontia benefits	\$1,000 per covered person	\$1,500 per covered person			

^{*} For services provided by non-participating dentists, plan benefit payments are based on the lesser of the submitted amount or Delta Dental's non-participating dentist fee.

reading the river



To determine if the water downstream is a Class II rapid or a just a riffle means your vision has to be at its best.

To help keep your eyesight keen, the University offers two plans for board-appointed employees only:

- · Ameritas Vision Perfect Reimbursement Only
- VSP Vision Care

FULL-TIME PER PAY CONTRIBUTIONS FOR 2014 VISION PLANS

WHO'S COVERED	AMERITAS	VSP
You	\$0.00	\$0.00
You + spouse or other eligible adult	\$0.00	\$0.00
You + child	\$0.00	\$0.00
You + children	\$0.00	\$0.00
You + family (spouse or other eligible adult + children)	\$0.00	\$0.00





DID YOU KNOW?

Age-related macular degeneration is a leading cause of vision loss in adults 50 and older. Your eye doctor can check for it during a vision exam.

Source: National Institutes of Health Eye Institute

VISION PLAN COVERAGE AT-A-GLANCE

	VISION PERFECT REIMBURSEMENT ONLY	VSP VISION CARE	
	(AMERITAS)	VSP PROVIDER	NON-VSP PROVIDER
One exam (once each 12-month period)	After you pay \$20 deductible*, plan pays reimbursement up to \$75	You pay \$10 copay, then plan pays 100%	You pay \$10 copay, then plan pays reimbursement up to \$52
Eyeglass lenses (once each 12-month period)	After you pay \$20 deductible*, plan pays reimbursement up to:	You pay \$25 deductible**, then plan pays 100%	You pay \$25 deductible**, then plan pays reimbursement up to:
Single visionBifocalTrifocalLenticularProgressive	\$60 \$80 \$95 \$100 \$100		\$55 \$75 \$95 \$125 Not applicable
Eyeglass frames (once every two years)	After you pay \$20 deductible*, play pays up to \$150 reimbursement	You pay \$25 deductible**, then plan pays reimbursement up to \$120	You pay \$25 deductible**, then plan pays reimbursement up to \$45
Contact lenses (once each 12-month period)	Plan pays up to \$210 reimbursement	Plan pays up to \$120 reimbursement for contacts and fitting exam	Plan pays up to \$105 reimbursement for contacts and fitting exam

^{*} Deductible applies to the first service received.

^{**} Deductible applies to complete pair of glasses or to frames, whichever is selected.

shelter from a storm



Idaho's weather can be unpredictable, but when a storm blows in, you can stay warm, dry and safe if you have the right equipment.



IMPORTANT

Is Your Beneficiary Current?

When you enroll in life insurance basic and optional — or AD&D insurance, you'll name a person, or persons, as your beneficiary to receive your benefits when you die.

You may change your beneficiary during annual enrollment.

If you need to change your beneficiary later, you can do that on the VandalWeb portal. Click the Employee Menu tab, then click myBenefits to access the benefits website. Once logged in, select Update Beneficiaries under myTools.

To protect you and your family from life's storms, the University provides three features to help in case of injury, illness or death:

- Short-term (STD) and long-term (LTD) disability
- Accidental death and dismemberment (AD&D)
- Life insurance

DISABILITY INSURANCE

If you get injured or become ill, and it's not work-related, disability insurance pays you part of your income while you're away from work.

There is no cost to you for basic coverage, which pays 50 percent of your income up to the benefit maximum.

Short-Term Disability Waiting Period

Short-term disability begins paying on the 30th day you miss work and lasts up to six

months from your last day worked. Your basic coverage pays 50 percent of your salary up to \$500 a week. You may increase your coverage during annual enrollment to 60 or 66.67 percent of your salary.

If you increase your coverage, then apply for STD within 12 months, the waiting period for the increased amount could be up to 60 days; however, the basic coverage amount will start on the 30th day. This is called a late enrollment penalty.

Long-term disability begins when STD ends and pays 50 percent of your salary up to \$2,000 a month. During annual enrollment, you may increase your coverage to 60 or 66.67 percent of your salary.

There are no waiting periods for longterm disability. See your Summary Plan Description for more information.

FULL-TIME PER PAY CONTRIBUTIONS FOR 2014 DISABILITY PLANS

STD	PER \$10 OF BENEFIT	LTD	PER \$100 OF BENEFIT
50% up to \$500 a week	No cost to you	50% up to \$2,000 a month	No cost to you
60% up to \$700 a week	\$.046	60% up to \$3,000 a month	\$.155
66.67% up to \$1,250 a week	\$.071	66.67% up to \$5,000 a month	\$.300



AD&D insurance protects you and your family in case of death, loss of a limb or eyesight, and certain other conditions that result from an accident. In the event of an accidental death, AD&D benefits are payable in addition to life insurance.

You may choose coverage for yourself and your family members. Coverage on family members pays a percentage of your benefits.



AD&D COVERAGE

FAMILY MEMBER	PERCENT OF YOUR BENEFITS PAID	
You	100%	
Spouse	50%	
Children	10%, up to \$25,000 per child	
Spouse and children	40% and 5%	

FULL-TIME PER PAY CONTRIBUTIONS FOR 2014 AD&D PLANS

COVERAGE	PER \$1,000 OF BENEFIT	
Employee	\$0.30	
Family	\$0.045 (per entire family, not family member)	

LIFE INSURANCE

The University provides you with basic life insurance at no cost to you. The coverage is equal to 1x your base annual salary.

You may buy optional life insurance of up to \$1 million on yourself. You also may buy life insurance coverage for your spouse and eligible dependent children.

Per paycheck contributions for optional dependent life insurance will range from 30 cents for \$5,000 of coverage to \$1.50 for \$25,000 of coverage.

FULL-TIME PER PAY CONTRIBUTIONS FOR 2014 OPTIONAL EMPLOYEE AND SPOUSE LIFE INSURANCE

COVERAGE	PER \$1,000 OF BENEFIT		
AGE	NON-TOBACCO	TOBACCO	
Under 30	\$0.05	\$0.08	
30-34	\$0.06	\$0.09	
35-39	\$0.07	\$0.11	
40-44	\$0.10	\$0.16	
45-49	\$0.15	\$0.24	
50-54	\$0.23	\$0.36	
55-59	\$0.41	\$0.51	
60-64	\$0.57	\$0.74	
65-69	\$0.88	\$1.27	
70 +	\$1.58	\$2.14	



IMPORTANT

Tobacco Use and Life Insurance

Tobacco use affects the rates you'll pay for optional and spouse life insurance. You'll report your tobacco use when you enroll for benefits.

If you or your spouse use tobacco when you enroll but complete a tobacco-cessation program later in the year, your rates will decrease the next year.

Email benefits@uidaho.edu to change your tobacco-use status.



IMPORTANT

Evidence of Insurability

You may be required to complete an evidence of insurability (EOI) form when you buy optional or spouse life insurance.

Life insurance policy underwriters will review your EOI to determine your eligibility. You will only pay a premium on the amount of insurance the underwriters approve.

building buoyancy

When you're standing on a paddleboard in the middle of a lake, you want to be as high in the water as possible. Buoyancy creates stability, making it easier for you to stay afloat and get to where you're going.

Spending and savings accounts help you maintain financial buoyancy by allowing you to set aside pre-tax money every paycheck to pay for out-of-pocket medical expenses. Depending on the health plan you choose, you may enroll in a Health Savings Account (HSA) or a Health Care Flexible Spending Account (Health Care FSA). There are important differences between the two.

HEALTH SAVINGS ACCOUNT

You may only participate in an HSA if you enroll in the High-Deductible Health Plan.

An HSA combines features of a flexible spending account with those of a 401(k) or Individual Retirement Account. You use the money to pay qualified out-of-pocket health care expenses. Those expenses include deductibles, coinsurance, medical procedures, prescription drugs, dental, vision, etc. Review a list of eligible expenses at www.irs.gov and download publication 502.

You and the University contribute pre-tax dollars to the account, which belongs to you. Any money in your HSA at the end of the

year is yours and stays in your account. Each year, HSA dollars roll over so you can use them down the road.

HSA money also earns interest. And, once your balance hits \$3,000, you may invest a portion of it in mutual funds. Interest and investment earnings are tax-free as long as you keep them in your HSA or use them for eligible health care expenses. You can change your HSA contribution amount any time during the year. And, the HSA money is yours, even if you leave the University or retire.

2014 HSA CONTRIBUTIONS

2014 HSA CONTRIBUTION AMOUNTS*				
If you enroll in	You may save up to**	The University will contribute up to (\$0.50 for every \$1.00 you contribute)		
Employee only coverage	\$2,800 (Contribute \$1,000 to receive full University matching contribution)	\$500		
"Family" coverage: • Employee + spouse or other eligible adult • Employee + child • Employee + children • Employee + spouse + child(ren)	\$5,550 (Contribute \$2,000 to receive full University matching contribution)	\$1,000		

^{*} This table reflects the 2014 combined employee + employer Health Savings Account contribution limits, which are \$3,300 for an individual and \$6,550 for a family. These limits may change each year.

You must report HSA contributions — yours and the University's — and your withdrawals on your federal income tax return.

HEALTH CARE FLEXIBLE SPENDING ACCOUNT

You may only participate in a Health Care FSA if you enroll in the Standard PPO medical plan.

You can use your Health Care FSA to pay eligible out-of-pocket health care expenses such as deductibles, medical procedures, dental, vision, prescription drugs, etc. You can use it for you or anyone you cover under your medical plan or claim as a dependent on your federal income tax return. The maximum contribution is \$2,500 per plan year. Once the amount is set during annual enrollment it cannot be changed until the next annual enrollment.

^{**} If you are age 55 or older in 2014, you may save an additional \$1,000 in catch-up contributions.

KEY DIFFERENCES BETWEEN AN HSA AND HEALTH CARE FSA

While the HSA and Health Care FSA are similar, they are different types of accounts — and the difference is important.

HSA

- Available only to HDHP participants
- Unused money rolls over to the next year
- University contributes matching funds

Health Care FSA

- Available only to Standard PPO participants
- "Use it or lose it" at the end of the year, unused money goes away
- University doesn't contribute matching funds

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

Participants in the HDHP and Standard PPO plans may enroll in a Dependent Care FSA.

You can use this account to pay for eligible dependent care costs with pre-tax dollars so you and your spouse can work, look for work or attend school full time.

Generally, an eligible dependent is:

- · Your child under 13 years old
- · A disabled spouse or dependent of any age who lives with you

Eligible expenses include:

- Private child care
- Child care at a day camp or preschool
- After-school care
- Housekeeper if their duties include caring for eligible dependent
- Elder care for an incapacitated adult who lives with you

The maximum contribution per plan year is \$5,000. Once the amount is set during annual enrollment it cannot be changed until the next annual enrollment.

HOW FSAs WORK

You choose how much to contribute to the FSA for the year. The money is deducted from your paycheck before income and Social Security taxes are withheld.

You must re-enroll every year. Because FSAs are "use it or lose it," consider your needs carefully before choosing how much to contribute.

You pay for eligible costs out-of-pocket, then submit a claim and receipts to Take Care by WageWorks, or sign up for direct deposit.

You can find a complete list of eligible expenses for HSAs and FSAs at www.irs.gov.



IMPORTANT

Important Dependent Care FSA Information

When you file your federal income tax return, you must provide the dependent care provider's name, address and Social Security or federal tax ID number.

Most providers know about this requirement so won't be surprised when you ask for it.

If you can't provide this information, you shouldn't use the Dependent Care FSA to pay for those services.

If you participate in the Dependent Care FSA, you can't claim the federal child care credit for these expenses.



the buddy system

Rock climbing with a buddy is a smart and fun way to stay safe. They check all of the climbing systems, and provide another set of eyes and ears to ensure you have a successful climb. In short, they have your back.

Our free, confidential Employee Assistance Program (EAP), provided by APS Healthcare, is your buddy in addressing work and life issues before they become problems. EAP also provides other resources that can make daily life a little easier, including career development tools.

Articles, webinars, skill builders, assessments, and podcasts for University employees, managers and leaders address topics that include:

- Family and relationship concerns
- Substance abuse
- Grief and loss
- Depression and anxiety
- Work-related issues

Managers and supervisors have unlimited telephone consultations with a dedicated team of specialists who can help with workplace concerns.

For all employees, consultations are available with qualified professionals for:

- Financial services
- Legal services Free consultation and discounted attorney fees
- Family care giving Resources and referrals
- · Convenience services Help with finding household and daily living resources, including pet care services, home repairs, travel planning and event scheduling

EAP can even help you find the cheapest gasoline!

Visit www.apshelplink.com and enter UI1 as the employer code.



DID YOU KNOW?

The University's EAP also offers career-development services such as behavior-based interviewing, emotional intelligence, and developing listening and feedback skills.





your ecosystem



To stay in balance, your personal ecosystem needs as much care as the one that surrounds you.

In addition to our medical plan, the University has several wellness resources to help your mind and body maintain harmony.

This table shows who may participate in each of the University's wellness programs.

WELLNESS RESOURCE	ALL UNIVERSITY EMPLOYEES	MEDICAL PLAN PARTICIPANTS ONLY
Chronic condition management		•
Flu shots	•	
Health coaching		•
Nurse hotline		•
Tobacco-cessation program	•	
Wellness fairs	•	

VOLUNTARY BENEFITS

extra equipment

Runners often carry extra socks so they don't get blisters. Cyclists carry spare tires. Nordic skiers carry different kinds of wax in case snow conditions change.

You may want some extras to protect you if your life conditions change. The University offers:

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- · AFLAC benefits
- · Auto and homeowners insurance through Liberty Mutual
- Prepaid legal and identity theft protection
- · Educational benefits for employees, spouses and dependents
- Adoption assistance
- UI Children's Center
- Latah Federal Credit Union
- Student Recreation Center
- Long-term care insurance

For more information, go to www.uidaho.edu/benefits/otherbenefits.



OUESTIONS?

For more information on your benefits, eligibility and enrollment, visit VandalWeb and click myBenefits under the Employee Tab. Or, call 208-885-3697 or 800-646-6174.

contribution tables

HEALTH PLANS: BOARD OF REGENTS-APPOINTED EMPLOYEES PER PAY CONTRIBUTIONS FOR 2014

WHO'S COVERED	STANDARD PPO	HDHP WITH HSA
You	\$56.75	\$24.99
You + spouse or other eligible adult*	\$119.18	\$52.48
You + child	\$79.46	\$34.99
You + children	\$120.31	\$52.98
You + family (spouse or other eligible adult* + children)	\$160.04	\$70.47

^{*} Federal tax law requires you to pay federal income and Social Security taxes on the full value of coverage for an eligible adult and their children unless they qualify as your tax dependents (www.irs.gov). The value of the coverage is reported as imputed income on your W-2. For more information, visit uidaho edu and go to annual enrollment, or call 208-885-3638.

NOT BOARD OF REGENTS-APPOINTED EMPLOYEES: PER PAY CONTRIBUTIONS FOR 2014

WHO'S COVERED	STANDARD PPO	HDHP
You	\$215.47	\$183.71
You + child	\$301.66	\$257.19
You + children	\$456.80	\$389.47

DENTAL PLANS: BOARD-APPOINTED FULL-TIME PER PAY CONTRIBUTIONS FOR 2014

WHO'S COVERED	STANDARD DENTAL	DENTAL PLUS
You	\$0.00	\$2.95
You + spouse or other eligible adult*	\$0.00	\$6.61
You + child	\$0.00	\$5.90
You + children	\$0.00	\$11.22
You + family (spouse or other eligible adult* + children)	\$0.00	\$11.91

VISION PLANS: BOARD-APPOINTED FULL-TIME PER PAY CONTRIBUTIONS FOR 2014

WHO'S COVERED	AMERITAS	VSP
You	\$0.00	\$0.00
You + spouse or other eligible adult*	\$0.00	\$0.00
You + child	\$0.00	\$0.00
You + children	\$0.00	\$0.00
You + family (spouse or other eligible adult* + children)	\$0.00	\$0.00

^{*} Federal tax law requires you to pay federal income and Social Security taxes on the full value of coverage for an other eligible adult and their children unless they qualify as your tax dependents (www.irs.gov). The value of the coverage is reported as imputed income on your W-2. For more information, visit uidaho.edu and go to annual enrollment, or call 208-885-3638.

DISABILITY PLANS: BOARD-APPOINTED FULL-TIME PER PAY CONTRIBUTIONS FOR 2014

STD	PER \$10 OF BENEFIT	LTD	PER \$100 OF BENEFIT
50% up to \$500 a week	No cost to you	50% up to \$2,000 a month	No cost to you
60% up to \$700 a week	\$.046	60% up to \$3,000 a month	\$.155
66.67% up to \$1,250 a week	\$.071	66.67% up to \$5,000 a month	\$.300

OPTIONAL EMPLOYEE AND SPOUSE LIFE INSURANCE: **BOARD-APPOINTED FULL-TIME PER PAY CONTRIBUTIONS FOR 2014**

COVERAGE	PER \$1,000 OF BENEFIT	
AGE	NON-TOBACCO	TOBACCO
Under 30	\$0.05	\$0.08
30-34	\$0.06	\$0.09
35-39	\$0.07	\$0.11
40-44	\$0.10	\$0.16
45-49	\$0.15	\$0.24
50-54	\$0.23	\$0.36
55-59	\$0.41	\$0.51
60-64	\$0.57	\$0.74
65-69	\$0.88	\$1.27
70 +	\$1.58	\$2.14

AD&D PLANS: BOARD-APPOINTED FULL-TIME PER PAY CONTRIBUTIONS FOR 2014

COVERAGE	CONTRIBUTION	
Employee	\$0.30	
Family	\$0.045 (per entire family, not family member)	

benefit directory

BENEFIT	ADMINISTRATOR	HOW TO ACCESS
Medical plan	Blue Cross of Idaho	1-866-685-2258 www.bcidaho.com
Prescription drug plan	CVS Caremark	1-888-202-1654 customerservice@caremark.com www.caremark.com
Dental plan	Delta Dental of Idaho	1-800-356-7586 www.deltadentalid.com
Vision plan	Ameritas/VSP	1-800-487-5553 www.ameritasgroup.com
Health and Dependent Care Flexible Spending Accounts	TBD	www.uidaho.edu/benefits
Health Savings Account	Health Equity	1-888-769-8696 www.HealthEquity.com
Disability claims	The Standard	1-800-368-2859
EAP	APS	1-800-999-1077 www.apshelplink.com (code UI1) Emergency Crisis 24/7 1-800-833-3031
HOW DO I	CONTACT	HOW TO ACCESS
Enroll in or change my benefits, or report a dependent change	University of Idaho Benefits Center	In the VandalWeb , under the Employee Tab, click myBenefits 1-208-885-3697 1-800-646-6174
Ask general questions about my benefits, eligibility and enrollment	University of Idaho Benefits Center	In the VandalWeb , under the Employee Tab, click myBenefits 1-208-885-3697 1-800-646-6174
Contact the retirement plan providers for: • Classified/Grandfathered Exempt Employees	PERSI	1-800-451-8228 www.persi.state.id.us
• Exempt/Faculty	Valic	1-800-448-2542 www.valic.com
	TIAA – CREF	1-800-842-2733 www.tiaa-cref.org