

DEPAUW UNIVERSITY

Est. 1837

2021

Employee Benefit Guide

Plan Year	January 1 – December 31, 2021
Open Enrollment	November 2 – November 13, 2020
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Login instructions & additional resources can be found on the Human Resources intranet site.

Presented by:



DEPAUW

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Open Enrollment & Benefit Highlights

2021 Plan Year Details

The health and financial security of you and your family is important to us. Our benefit program provides a variety of plans that can enhance the lives of you and your family – both now and in the future. As an eligible employee, you will be asked to make decisions about the employee benefits described in this booklet. This guide provides information to enable you to effectively enroll in your benefits. Take time to read it carefully and use the available resources to ensure you make the decisions that are right for you and your family.

The Open Enrollment period is an opportunity for eligible employees to enroll in or make changes to your benefits for the upcoming year. This year Open Enrollment is **November 2 – November 13 at 5 pm EST**.

This is the only time during the year that you are eligible to make benefit plan changes unless you have a qualifying life event that allows you to change your benefits mid-year. Changes made during Open Enrollment will be effective January 1, 2021.

	Medical Plan	<ul style="list-style-type: none">• No Plan design changes• Employee premiums will increase for 2021• UMR remains the medical plan administrator• Deductible is reset for 2021 calendar year
	Dental Plan	<ul style="list-style-type: none">• No plan design changes• No employee premium changes• Delta Dental remains dental carrier
	Vision Plan	<ul style="list-style-type: none">• No plan design changes• No employee premium changes• Anthem remains vision carrier

Quick Reference Guide

UMR (Medical)	www.umar.com	800-207-3172
UMR 24/7 Nurse Assistance Line		877-950-5083
OC24 Health (Telemedicine)	www.oc24health.com	855-617-2116
Anthem Vision	www.anthem.com	866-723-0515
Cigna Behavioral Health 24/7 (EAP)	www.mycigna.com	888-371-1125
Delta Dental	www.deltadentalin.com	800-524-0149
Express Scripts (Rx)	www.express-scripts.com	844-808-8045
HRPro (FSA Dependent Care)	www.hrpro.biz	800-989-8776
HSA Bank	www.myaccounts.hsabank.com	800-357-6246
TIAA (403b)	www.tiaa.org/public/tcm/depauw	765-497-8746
Open Enrollment Link (ADP Portal)	www.workforcenow.adp.com	

Terms You Should Know

Benefit Eligible. All full-time employees working an average of at least 30 hours per week are eligible for benefits. For new hires, your benefits begin on your date of hire. For Medical, Dental and Vision your qualified dependents include your legal spouse and children to age 26. For Voluntary Dependent Life, your covered dependents include your spouse and children to age 25 provided they are full-time students.

Limited Spousal Eligibility. If your spouse is employed and your spouse's employer provides a medical plan for which the employer pays at least 50% of "Employee Only" coverage, your spouse must enroll in that plan in order to be eligible to enroll in any of the DePauw University Medical plans.

Deductible. The amount you pay for covered health care expenses before your insurance starts to pay. For example, with a \$2,000 plan year deductible, you pay the first \$2,000 covered services.

Coinsurance. The percentage of costs of a covered health care service you pay (for example 20%), after you have paid your plan year deductible.

Out-of-Pocket Maximum. The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your health plan pays 100% of the costs of covered benefits.

Network Benefits (In-Network). In network providers agree to accept the UMR's approved amount for their services. You will see these savings listed as the "discounted amount" on your Explanation of Benefits statements.

Non-Network Benefits (Out-of-Network). Doctors or hospitals who are not in the network do not accept the UMR's approved amount. You will be responsible for paying the difference between the provider's full charge and your plan's approved amount. This is called balance billing.

Preventive Care. Preventive care is the care you receive to prevent illnesses or diseases. Providing these services at no cost is based on the idea that getting preventive care, such as screenings and immunizations, can help you and your family stay healthy. Services will be paid at 100% when you use a participating provider.

Embedded deductible plans. Under family coverage, an embedded deductible plan means that each family member has an individual deductible in addition to the total family

deductible. Each individual's deductible is much lower than the total family deductible. When an individual meets their respective out-of-pocket total, the insurer begins to pay for that person's covered medical services, regardless of whether the family deductible has been fulfilled.

- The benefit of embedded deductibles: in some cases, this double-layered deductible can actually enhance individuals' coverage, according to the Center for Health Insurance Reform at Georgetown University. If an individual family member incurs a significant amount of medical expenses, the individual will fulfill their deductible sooner because it is lower than the family deductible. This can save families thousands of dollars because the individual's insurance policy will begin to cover benefits even if the family deductible isn't met.

Non-embedded deductibles. Under a non-embedded deductible plan, also known as an aggregate deductible plan, the total family deductible must be paid out-of-pocket before the insurer starts paying for healthcare services for any individual member.

- Non-embedded deductibles are not economical for some families. For some families, such as married couples without children, non-embedded deductible plans can cause families to spend thousands of dollars in extra out-of-pocket expenses that otherwise would have been covered had they purchased individual plans with lower deductibles or embedded family plans.

When Life Changes. Employees may add/remove/make benefit changes during the Open Enrollment period which is held annually. However, we understand that life happens. Employees have 31 days from the date of the qualified life event to make changes/updates. Examples of a life events include: birth or adoption of a child; marriage or divorce; death; loss of coverage; and employment status change.

As the employee, you will log into the ADP portal to request change(s). In addition, you will also need to provide documentation that reflects need for change(s) and must be submitted to HR before workflow can be approved.

Plan Compliance Notifications. Federal required Notices including but not limited to the HIPAA Privacy and Security, Certificate of Creditable Coverage for Medicare and Market "Exchange" Notices. Health Care Reform Notices are available online on the human resources internet site or via paper, free of charge, upon request. Please contact human resources with questions.

Your Medical Provider

UMR – A

UnitedHealthcare
Company

UnitedHealthcare
Choice Plus Network



A UnitedHealthcare Company



Web Services – Services at your Fingertips

- Register for web services at <https://umr.com>
- UMR Website Tour: <https://youtu.be/H2x74C0X2Bs>
- Find a Provider Tour: <https://www.youtube.com/watch?v=RQ8kA5gu26o>

Just a Click Away – 24/7 Access

- Benefit Plan Details
- Deductible, Out-of-Pocket Accumulations
- ID Cards
- Paid Claims for you and your insured dependents
- Medical PPO Network providers using the United Healthcare Choice Plus Network.
- Health and Wellness Tools including
 - Plan Cost Estimator
 - Healthy “U” Presentations
 - Health Education Library



5 This benefit guide only highlights the benefits available. For a more complete description, see the Plan Certificate. If any conflict should arise between this summary and the Plan, the Plan's Certificate will govern in all cases.

Provider Benefits

From UMR



UMR Mobile Services Available 24/7

- Mobile Access - <https://youtu.be/ZjHZwMm9ixM?list=PL4x4UY0pns9BEDG1skPZbg7SAP9JWpAGh>
- 24/7 mobile access to plan information, paid claims, provider and other UMR Helpful Tools including:
 - Plan Cost Estimator, Health and Wellness Resources, tools on navigating the app
- Mobile Services Tour – <https://www.youtube.com/watch?v=ZjHZwMm9ixM>
- Have Questions? Call the Customer Support Center using the phone number on your ID card.

NurseLineSM

A call to the UMR's NurseLine service will connect you to a team of registered nurses who can answer your questions and provide advice. Calling the NurseLine is easy and a free service if enrolled in the DePauw's medical plan. Simply dial toll-free 877-950-5083 available 24 hours, 7 days a week; the number can also be found on the back of your member ID card.

OC24Health (Telemedicine)

This service gives you access 24 hours, 7 days a week to a U.S. board-certified doctor through the convenience of a phone, video or mobile app visits. It is an affordable option for quality medical care. OC24Health doctors can treat many medical conditions including cold & flu symptoms, allergies, pink eye, respiratory infection sinus problems, skin problems and more.

- General medical = \$45/visit fee, Psychiatrists = \$95/session (\$200 for the initial evaluation)

Premium Provider Designations

The UnitedHealth Premium program, offered through UMR evaluates various specialties using evidence-based medicine and national standardized measures to help you locate quality and cost-effective providers. The key below explains the designations on the UMR website:

♥♥ Premium Care Physician	Physician meets Premium Program criteria for quality and cost-efficient care
♥♥ Quality Care Physician	Physician meets program criteria for providing quality care
♥♥ Not Evaluated For Premium Care	Program criteria does not evaluate physicians in this specialty or the physician does not have enough data to be evaluated for quality.
♥♥ Does Not Meet Premium Quality Criteria	Physician does not meet program criteria for providing quality care.

Prescription Management by ExpressScripts (ESI)

ESI is a dedicated partner in pharmacy management. You will have access to pharmacy services and information using the web page, mobile app or on demand. If you take prescribed medicine on a regular basis, you can get up to a 90-day supply delivered to your home.

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2021 Medical Benefit Overview

Medical & Prescription Drugs Insured by UMR

	Consumer Driven Health Plan 1		Consumer Driven Health Plan 2		Consumer Driven Health Plan 3	
	Network Benefits	Non-Network Benefits	Network Benefits	Non-Network Benefits	Network Benefits	Non-Network Benefits
Physician Office Visit	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Specialist Office Visit	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Deductible	Embedded		Non-Embedded		Non-Embedded	
Single	\$3,000	\$4,500	\$2,000	\$4,000	\$1,500	\$3,500
Family	\$3,000 Individual \$6,000 Family	\$9,000	\$4,000	\$8,000	\$3,000	\$7,000
Coinsurance	20%	40%	20%	40%	20%	40%
Out-of-Pocket Maximum	Embedded		Non-Embedded		Non-Embedded	
Single	\$4,500	\$9,000	\$4,000	\$8,000	\$3,000	\$7,000
Family	\$4,500 Individual \$7,350 Family	\$18,000	\$7,000	\$16,000	\$6,000	\$14,000
Preventive Care	100% Coverage	40% after Deductible	100% Coverage	40% after Deductible	100% Coverage	40% after Deductible
Hospital Services	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Out-Patient Services	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Maternity Services	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Emergency Room Services	20% after Deductible		20% after Deductible		20% after Deductible	
Urgent Care Centers	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Mental & Nervous						
In-Patient	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Out-Patient	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Substance Abuse						
In-Patient	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Out-Patient	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible	20% after Deductible	40% after Deductible
Retail Prescription Drugs						
Generic	0% after Deductible	40% after Deductible	0% after Deductible	40% after Deductible	0% after Deductible	40% after Deductible
Preferred	40% after Deductible	40% after Deductible	40% after Deductible	40% after Deductible	40% after Deductible	40% after Deductible
Non-Preferred	50% after Deductible	40% after Deductible	50% after Deductible	40% after Deductible	50% after Deductible	40% after Deductible
Mail Order Prescription Drugs						
Generic	0% after Deductible	Not Covered	0% after Deductible	Not Covered	0% after Deductible	Not Covered
Preferred	40% after Deductible	Not Covered	40% after Deductible	Not Covered	40% after Deductible	Not Covered
Non-Preferred	50% after Deductible	Not Covered	50% after Deductible	Not Covered	50% after Deductible	Not Covered
Lifetime Maximum	Unlimited		Unlimited		Unlimited	

*Some Generic Rx medications used to prevent chronic conditions are not subject to the individual and/or family deductibles.

Medical Administration by UMR: UMR has negotiated discounts with a large national network of doctors and hospitals named United Healthcare Choice Plus. You will enjoy the highest level of benefits and the greatest value if you choose to receive care through the Choice Plus Network of providers. While it is not required that you utilize the network, the services you obtain outside of the network will be billed at a greater cost to you. You may log onto www.umar.com for a listing of participating providers.

2021 Monthly Medical Premiums

Medical & Prescription Drugs Insured by UMR

CDHP 1		Salary Range (Based on 24 Pays)						
		< \$30,000	\$30,000 - <\$50,000	\$50,000 - <\$75,000	\$75,000 - <\$100,000	\$100,000 - <\$125,000	\$125,000 - <\$150,000	\$150,000 +
Employee Only	EE Share	\$43.87	\$76.36	\$115.86	\$151.55	\$170.60	\$183.81	\$206.69
	ER Share	\$702.68	\$670.19	\$630.69	\$595.00	\$575.95	\$562.74	\$539.86
	Total	\$746.55	\$746.55	\$746.55	\$746.55	\$746.55	\$746.55	\$746.55
Employee + Spouse	EE Share	\$100.65	\$165.60	\$257.74	\$319.95	\$366.70	\$383.80	\$428.45
	ER Share	\$1,467.14	\$1,402.19	\$1,310.05	\$1,247.84	\$1,201.09	\$1,183.99	\$1,139.34
	Total	\$1,567.79	\$1,567.79	\$1,567.79	\$1,567.79	\$1,567.79	\$1,567.79	\$1,567.79
Employee + Child/ren	EE Share	\$94.02	\$158.84	\$252.69	\$310.47	\$356.34	\$372.03	\$415.29
	ER Share	\$1,288.03	\$1,223.21	\$1,129.36	\$1,071.58	\$1,025.71	\$1,010.02	\$966.76
	Total	\$1,382.05	\$1,382.05	\$1,382.05	\$1,382.05	\$1,382.05	\$1,382.05	\$1,382.05
Employee + Spouse & 1 Child	EE Share	\$155.57	\$252.71	\$387.30	\$509.26	\$603.66	\$629.23	\$703.98
	ER Share	\$2,158.79	\$2,061.65	\$1,927.06	\$1,805.10	\$1,710.70	\$1,685.13	\$1,610.38
	Total	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36
Employee + Spouse & >1 Child	EE Share	\$214.83	\$358.23	\$520.46	\$620.96	\$739.28	\$770.50	\$859.84
	ER Share	\$2,099.53	\$1,956.13	\$1,793.90	\$1,693.40	\$1,575.08	\$1,543.86	\$1,454.52
	Total	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36	\$2,314.36

CDHP 2		Salary Range (Based on 24 Pays)						
		< \$30,000	\$30,000 - <\$50,000	\$50,000 - <\$75,000	\$75,000 - <\$100,000	\$100,000 - <\$125,000	\$125,000 - <\$150,000	\$150,000 +
Employee Only	EE Share	\$48.99	\$81.48	\$120.98	\$156.67	\$175.73	\$188.94	\$211.82
	ER Share	\$703.25	\$670.76	\$631.26	\$595.57	\$576.51	\$563.30	\$540.42
	Total	\$752.24	\$752.24	\$752.24	\$752.24	\$752.24	\$752.24	\$752.24
Employee + Spouse	EE Share	\$111.40	\$176.35	\$268.50	\$330.70	\$377.45	\$394.55	\$439.20
	ER Share	\$1,468.35	\$1,403.40	\$1,311.25	\$1,249.05	\$1,202.30	\$1,185.20	\$1,140.55
	Total	\$1,579.75	\$1,579.75	\$1,579.75	\$1,579.75	\$1,579.75	\$1,579.75	\$1,579.75
Employee + Child/ren	EE Share	\$103.50	\$168.33	\$262.17	\$319.96	\$365.82	\$381.51	\$424.77
	ER Share	\$1,289.09	\$1,224.26	\$1,130.42	\$1,072.63	\$1,026.77	\$1,011.08	\$967.82
	Total	\$1,392.59	\$1,392.59	\$1,392.59	\$1,392.59	\$1,392.59	\$1,392.59	\$1,392.59
Employee + Spouse & 1 Child	EE Share	\$171.44	\$268.59	\$403.18	\$525.14	\$619.53	\$645.11	\$719.86
	ER Share	\$2,160.57	\$2,063.42	\$1,928.83	\$1,806.87	\$1,712.48	\$1,686.90	\$1,612.15
	Total	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01
Employee + Spouse & >1 Child	EE Share	\$230.71	\$374.10	\$536.34	\$636.84	\$755.16	\$786.38	\$875.72
	ER Share	\$2,101.30	\$1,957.91	\$1,795.67	\$1,695.17	\$1,576.85	\$1,545.63	\$1,456.29
	Total	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01	\$2,332.01

CDHP 3		Salary Range (Based on 24 Pays)						
		< \$30,000	\$30,000 - <\$50,000	\$50,000 - <\$75,000	\$75,000 - <\$100,000	\$100,000 - <\$125,000	\$125,000 - <\$150,000	\$150,000 +
Employee Only	EE Share	\$79.93	\$117.66	\$162.41	\$203.35	\$227.66	\$246.12	\$274.25
	ER Share	\$700.88	\$663.15	\$618.40	\$577.46	\$553.15	\$534.69	\$506.56
	Total	\$780.81	\$780.81	\$780.81	\$780.81	\$780.81	\$780.81	\$780.81
Employee + Spouse	EE Share	\$196.84	\$267.04	\$359.18	\$437.14	\$499.64	\$521.99	\$582.39
	ER Share	\$1,442.90	\$1,372.70	\$1,280.56	\$1,202.60	\$1,140.10	\$1,117.75	\$1,057.35
	Total	\$1,639.74	\$1,639.74	\$1,639.74	\$1,639.74	\$1,639.74	\$1,639.74	\$1,639.74
Employee + Child/ren	EE Share	\$172.04	\$242.12	\$335.97	\$414.75	\$476.36	\$502.55	\$561.56
	ER Share	\$1,273.43	\$1,203.35	\$1,109.50	\$1,030.72	\$969.11	\$942.92	\$883.91
	Total	\$1,445.47	\$1,445.47	\$1,445.47	\$1,445.47	\$1,445.47	\$1,445.47	\$1,445.47
Employee + Spouse & 1 Child	EE Share	\$293.07	\$400.71	\$535.30	\$678.26	\$772.65	\$808.73	\$893.98
	ER Share	\$2,127.49	\$2,019.85	\$1,885.26	\$1,742.30	\$1,647.91	\$1,611.83	\$1,526.58
	Total	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56
Employee + Spouse & >1 Child	EE Share	\$352.33	\$506.23	\$673.71	\$863.46	\$987.03	\$1,034.00	\$1,154.84
	ER Share	\$2,068.23	\$1,914.33	\$1,746.85	\$1,557.10	\$1,433.53	\$1,386.56	\$1,265.72
	Total	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56	\$2,420.56



Health Savings Account

For a Qualified Consumer Driven Health Plan

A Health Savings Account (HSA) is a consumer-oriented, tax-advantaged savings account that is always combined with a Consumer Driven Health Plan (CDHP). It is an interest-accruing account, similar to an Individual Retirement Account (IRA), which provides financial control over how you spend your health care dollars and can be used to pay for your out-of-pocket medical expenses. HSA earnings grow tax-deferred and qualified withdrawals are tax-free without “use it or lose it” provisions found with a Flexible Spending Account (FSA). Money not used in your Health Savings Account can be rolled over to the following year. HSA funds can be used for all qualified medical expenses, including medical services, as well as eyeglasses, dental procedures, prescription drug coverage and over-the-counter medications provided you submit a prescription from your provider. See *IRS Publication 969* for more information and a listing of Qualified Eligible Expenses at

To qualify for an HSA, you must meet the following requirements, as defined by the IRS:

- You must be covered under a Consumer Driven Health Plan
- You have no other health coverage except what is permitted by the IRS
- You are not enrolled in Medicare
- You cannot be claimed as a dependent on someone else’s tax return.

How Should You Manage Your HSA?

- Contributions can be made with pre-tax money through payroll deductions, or contributions can be made post-tax and then deducted from your income when you file your income tax return.
- Funds should be limited to qualified medical expenses;
- Keep receipts documenting medical expenses;

When to Stop Contributing to Your HSA?

- When you are no longer enrolled in a qualified health plan;
- When you become eligible for Medicare and you plan to enroll, you must stop your HSA contribution 6 months prior to your Medicare effective date.



Annual HSA Base Contributions

If you enroll in one of the three CDHP plans for January 1, 2021, DePauw will make a base contribution to your HSA based on the tier of coverage you are enrolled in. The entire amount of this contribution will be available at the beginning of 1/ 2021.

DePauw University Annual HSA Base Contributions	
Employee Only	\$250
Employee+1 or more Dependents	\$500



HSA Incentive Plan

You will have an opportunity to earn additional HSA contributions through the incentive plan. If you are covering your spouse, they will also have the option of participating in the HSA incentive plan to earn contributions to your HSA. The maximum amount of incentive dollars you can earn each year is based on your tier of coverage in the medical plan.

Maximum HSA Incentive Contributions	
Employee Only	\$750
Employee+1 or more Dependents	\$1,500



IRS 2021 Maximum Contributions

	2021 IRS Max Contributions	IRS Post Age 55 “Catch-up”
Employee	\$3,600	\$1,000
Family	\$7,200	\$1,000

If You Will Be Turning 65

Active employees turning 65 have the option to accept or decline enrollment in Medicare, including Medicare Part A.

- Employees who accept enrollment in any part of Medicare are no longer eligible to make or receive contributions to an HSA.
- If you elect Medicare at age 65, your maximum HSA contribution for the year you elect will be prorated by the number of months you were not enrolled in Medicare.
- Employees who decline enrollment may continue to make and receive contributions to an HSA.
- Qualified distributions remain tax free regardless of your eligibility to contribute.
- Non-qualified distributions are taxable but no longer carry a 20% penalty after age 65.
- Medicare Part(s) A, B, D and Medicare HMO premiums may be paid or reimbursed with tax-free HSA dollars. You cannot use your HSA to pay for Medigap premiums.

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Dental & Vision Benefit Summary



Delta Dental

Annual Deductible	
Individual	\$50
Family	\$100
Annual Plan Maximum	\$1,250
Orthodontia Lifetime Maximum	\$1,000
Plan Coinsurance Levels	
Preventive Services	100%
Basic Services	80%
Major Services	50%
Orthodontia	50%

Provider Directory: www.deltadentalin.com

Monthly Premiums

	Employee	Employer
Employee Only	\$15.38	\$16.01
Employee + Spouse	\$30.00	\$27.82
Employee + Child(ren)	\$40.92	\$33.70
Family	\$59.42	\$54.96

Delta Dental offers three levels of benefit coverage: PPO Dentist, Premier Dentist and Non-Participating Dentist. Review summary of benefits for more details.

PPO Coverage - Offers significant discounts; no balance billing; acceptance of processing policies; and 108,000 dentist locations

Premier Coverage - Negotiated fees; no balance billing; acceptance of processing policies; and 186,000 dentist locations

Non-Participating Coverage - Balance billing and does not offer discounts



Anthem Vision

	In-Network	Out-Of-Network
Routine Eye Exam - (once every 12 months)		
	\$10 copay	\$40 allowance
Frames - (once every 24 months)		
	\$130 allowance then 20% off any remaining balance	\$45 allowance
Standard Plastic Lenses - (once every 12 months)		
Single vision (1 pair)	\$10 copay	\$40 allowance
Bifocal lenses (1 pair)	\$10 copay	\$60 allowance
Trifocal lenses (1 pair)	\$10 copay	\$80 allowance
Contact Lenses - (once every 12 months in lieu of glasses)		
Elective	\$130 allowance	\$105 allowance
Non-Elective	Covered in full	\$210 allowance

Provider Directory: www.anthem.com/mydentalvision
Allowances must be used on transaction

Employee Monthly Premiums

Employee Only	\$6.08
Employee + Spouse	\$10.66
Employee + Child(ren)	\$11.57
Family	\$17.67

Anthem Blue Cross and Blue Shield vision members have access to one of the nation's largest vision network. Blue View Vision is the only network that gives you the ability to use in-network benefits at 1-800-CONTACTS, or choose a private eye doctor, or go to retail vendors such as LensCrafters®, Sears Optical, Target Optical®, and most Pearle Vision locations.

Dependent Care Flexible Spending Accounts (FSA)

- HR Pro is the plan administrator
- For employees with dependents under the age of 13
- Pre-tax reimbursements of eligible expenses cannot exceed \$5000 (\$2500 if married and filing separate income tax returns)
- Planning is required, will lose money at the end of the plan year
- Claims must be filed by March 29, 2022
- Must enroll/elect each year during open enrollment

Basic Life, Basic AD&D, & LTD

For Full-Time Employees



Basic Life Insurance

A life insurance policy is a contract with an insurance company. In exchange for premium payments, the insurance company provides a lump-sum payment, known as a death benefit, to beneficiaries upon the insured's death.

Basic Life

Eligible Employees Include: Full Time Employees
2x's Annual Base Salary up to \$450,000
Benefit rounded to the next \$1,000
Coverage decreases incrementally beginning at age 65

Basic Accidental Death & Dismemberment Insurance

The rider covers the unintentional death or dismemberment of the insured. Dismemberment includes the loss, or the loss of use, of body parts or functions (e.g., limbs, speech, eyesight, or hearing).

Basic AD&D

Eligible Employees Include: Full Time Employees
1x's Annual Base Salary up to \$180,000
Benefit rounded to the next \$1,000
Coverage decreases incrementally beginning at age 65

Long-Term Disability Benefits

Disability benefits protect your income during a period in which you are unable to work because of an illness or accident not related to your job.

Long Term Disability

Elimination Period	180 Days
Monthly Income Benefit	60% of Earnings
Max. Monthly Benefit	\$10,000 (Salaried employees) or \$2,500 (Hourly employees)
Monthly Annuity Benefit	8% of total earnings, not to exceed \$1,333

Voluntary Insurance

Employees pay 100% of the premiums for Voluntary Benefits.

Voluntary Life

		EMPLOYEE BENEFIT	SPOUSE BENEFIT	CHILD(REN) BENEFIT
	Benefit Increments	\$10,000	\$10,000	\$10,000 or \$20,000
	Benefit Maximum	\$500,000	\$50,000	\$20,000
	Guarantee Issue		Cannot exceed 50% of employee amount	Cannot exceed 50% of employee amount
	Under age 60	\$150,000	\$50,000	
	Age 60-69	\$40,000	\$10,000	
	Age 70-79	\$20,000		
	Age 80 and older	\$1,000		
	Age 70 and over		No coverage available	
	Benefit Amount			
	Benefit Maximum			
	Guarantee Issue			

New Sun Life Voluntary Insurance Options

Voluntary Accident Insurance Supplemental Coverage



Designed to cover accidents that occur when employees are not at work. This insurance pays fixed cash benefits directly to you for specific injuries, procedures or death as a result of a covered accident. There are no health questions asked or pre-existing conditions limitations.

Example: A do it yourself project results in a deep arm wound, which requires a trip to the ER and surgery to repair your tendon. You would receive \$1,325 for the treatment of your injury to help pay for out-of-pocket medical expenses. See table.

Covered Benefits	High Plan Example
Emergency Room Visit	\$100
MRI	\$200
Surgery on Tendon	\$625
Laceration with Sutures	\$250
Follow-up Visit with 3 Visits	\$75
Physical Therapy 3 Visits	\$75

Voluntary Critical Illness Coverage

This insurance pays fixed cash benefits directly to you upon diagnosis of a covered critical illness after the coverage effective date. These benefits can help pay for out-of-pocket medical and non-medical expenses your medical insurance doesn't cover. Examples of covered illnesses are heart attack and/or stroke, Alzheimer's, ALS, cancer, certain childhood conditions and others. You are able to choose the benefit amounts that best meet your needs and your budget.

Employee	Spouse	Children
\$5,000 to \$20,000 in \$5,000 increments	\$2,500 to \$10,000 in \$2,500 increments	\$2,500 or \$5,000

Additional Benefits

Employee Assistance Program (EAP)

Cigna Behavioral Health offers personal help for difficult situations. Available to full- and part-time employees and anyone living in the household may utilize this free and confidential benefit. EAP services include up to three counseling sessions, financial planner or legal advice to name a few. Benefits are available 24/7 online at www.mycigna.com or call toll free 888-371-1125; user ID: depauwuniversity; password: employee name.

Identity Theft & Travel Assistance

These two Sun Life benefits are free and available to full time employees. Identity Theft helps unravel an identity breach. Register up to 10 credit/debit cards for monitoring. Also available, 24/7 travel assistance from unpredictable problems whenever you travel 100 miles or more from your home. Contact human resources for more information.

EIIA International Emergency Coverage

This benefit is available for individuals (staff, students, alumni, spouse, etc.) traveling international and on behalf of the University. Prior to travel, faculty should reach out to the Hubbard Center for Student Engagement and staff may also reach out to Human Resources.

TIAA 403(b) Retirement Plan

- DePauw's 403(b) program is administered by TIAA (Teachers Insurance and Annuity Association)
- Full-time employees that work 1000+ hours are automatically enrolled at 5% and will receive the employer's 4% contribution
- Part-time employees that work less than 1,000 hours are automatically enrolled at 5%; but are not eligible for the employer's contribution
- Employees are always 100% vested in plan
- Eligible to contribute 1-100% of your salary up to the IRS limits of \$19,500.

Wellness Center Services

DePauw University has a comprehensive wellness program that focuses on the physical, emotional and spiritual health of our faculty and staff. We want our employees to lead balanced lives and commit to developing lifelong habits of wellness. The campus Wellness Center is available to all faculty and staff participating on the DePauw University Health Plan, as well as their dependents. The Wellness Center is now located on the second floor of the Lily Center.

01

Contact Us

Phone (765) 658-4555 | Fax: (765) 658-4558

02

Wellness Center Hours

Monday – 8 a.m. to 12 p.m.
Tuesday – 2 p.m. to 6 p.m.
Wednesday – 10 a.m. to 2 p.m.
Thursday – 2 p.m. to 6 p.m.
Friday – 12 p.m. to 4 p.m.



www.DePauwHealth.org

03

Schedule a Wellness Appointment

Call the DePauw Health Wellness Center at (765) 658-4555 to make an appointment.

04

Schedule a Wellness Coaching Session

Please call (317) 718-8160 to schedule a personalized wellness coaching appointment with a certified Wellness Nurse.



HEALTH SERVICES

The Wellness Center at DePauw University supports the academic success, physical health and mental well-being of faculty and staff by providing the highest quality offerings in a timely and confidential manner. All faculty, staff and their dependents covered under the DePauw University health plan are eligible to use the Center's medical services.

There is no fee for most services provided in the Wellness Center as they are covered through health insurance premium contributions. Services include:

- **Clinic visits** – annual physicals, musculoskeletal visits, sick visits, and wellness coaching.
- **Chronic disease management** – support from clinical staff to better manage conditions such as diabetes, high cholesterol, asthma and others.
- **Health risk assessments** – helps identify targeted concerns and preventive health goals.
- **Referrals and care navigation** – support in the coordination of specialty referrals when needed, as well as the management of follow-up care.
- **Home Delivery & On-site pharmacy services** – features a formulary of the most commonly utilized medications.
- **Lab draws** – conveniently available on-site with rapid results turnaround.



info@nwpharma.com

phone 317-288-9762

toll-free 888-334-0052

fax 317-653-1113

Monday–Friday,

8am–5pm EST

Thank you for choosing Northwind Pharmacy!

Our pharmacy staff are available during regular business hours to answer any questions or concerns you have regarding your medication(s). Please don't hesitate to get in touch.

Your DePauw Health Wellness Center – in partnership with Hendricks Regional Health – now offers a convenient home delivery service for your prescription medications. Through a collaboration with Northwind Pharmacy, medications are delivered quickly, conveniently and securely to your home mailbox.

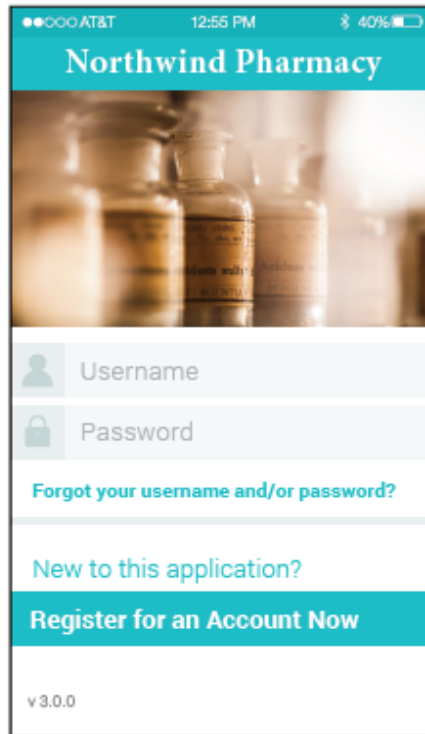
Things to know

Included is a Patient Education Summary and/or Medguide, providing you information on how to properly use your prescription.

- **If you have any drug allergies that we need to be aware of, please call us immediately!**
- You will receive communication via email/text/phone when your prescription has been shipped.
- If you are out of refills, please see a health provider before your prescription expires.
- If your prescription includes temperature-sensitive drug products, your package will arrive in a Styrofoam cooler with cold packs. These packs are safe to dispose in your own waste receptacle.
- For Regular Service, the primary shipping method will be USPS First Class with tracking, with 3-5 day mailing times.
- If you have a change of address or phone number, please notify your clinic and/or Northwind Pharmacy immediately.

For optimal service and convenience, download our free Northwind Pharmacy app for refills and reminders!

1 Go to your app store, download the "RxLocal" app and register for an account.

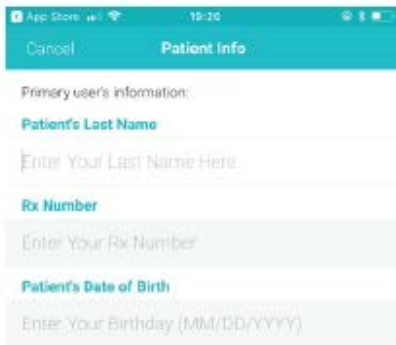


2 Find Northwind Pharmacy within the app.

- 1) After you click "Register" navigate to Indiana
- 2) After you click Indiana, navigate to Indianapolis
- 3) After you click Indianapolis you should see Northwind Pharmacy in the list.



3 Fill in your last name, Rx number, and date of birth. All fields much match our database.



4 Choose a username and fill in your email address.



5 Set a PIN that you'll remember, and you're ready to go!



Mental Health Matters

"You don't have to struggle in silence"



If you are suffering from a mental health condition, have hope: you are not alone. Depression, anxiety, substance use disorders, trauma, and other conditions affect people from all walks of life. Below are just a few resources available.

UMR Behavioral Health Providers

This benefit is for DPU employees and dependents on the DePauw Health Plan, services are subject to deductible, coinsurance and out-of-pocket maximums. Find providers on www.umar.com.

Cigna Employee Assistance Program (EAP)

This benefit is for **ALL** DPU employees and anyone living in your household whether or not you are on the DPU health plan. FREE and confidential 24/7 | user ID: depauwuniversity | password: employee name | www.mycigna.com | 888-371-1125.

OC24 Health Telemedicine Behavioral Health

Available only to employees and dependents currently on the UMR health plan. Don't wait to get the support you need. With OC24health's Behavioral Health, adults 18 and older can get confidential counseling seven days a week by video. This service is powered by Teledoc mobile app. The initial evaluation fee is \$200 and general sessions are \$95 dollars | www.oc24health.com.

DePauw's Spiritual Life Team

Available to all DPU employees:

- Chaplain Sami at samiaiziz@depauw.edu | 484-995-9676.
- Chaplain Beth at bethwatson@depauw.edu | 765-301-0087.
- Chaplain Maureen at mklangdoc@depauw.edu | 765-365-2269.
- Jewish Life Coordinator Lance daSilva at lancedasilva@depauw.edu | 540-850-1623.

Be Well Indiana

In addition to mental health resource, there are a wide range of free resources for Hoosiers available on this site www.BeWellIndiana.com. For example, help with substance use disorder & recovery resources, child care solutions, and more. You can start by calling 2-1-1. For crisis help text the word "**HOME**" to 741741.

Additional resources can be found on the HR "Support and Resources" web page.