2021
Indiana University
OPEN ENROLLMENT
October 26 – November 6, 2020

MEDICAL
SPENDING
SAVINGS
DENTAL
ACCIDENT

go.iu.edu/oe
What's Inside this Guide

Table of Contents

- What You Need to Know ........................................... 3
- Open Enrollment Checklist ....................................... 4
- What's Changing in 2021 .......................................... 5
- Medical Plans .......................................................... 6
- Health Savings Account (HSA) ................................. 12
- Tax Saver Benefit (TSB) Plan ................................. 14
- Dental Plan ............................................................. 17
- Supplemental AD&D .............................................. 18
- Benefit Programs, Resources, and Mobile Apps .......... 19
- Customer Service Contacts ...................................... 22
- Annual Federal Notices ........................................... 22
- Virtual Information Sessions .................................... 23

Important Reminders

1. During Open Enrollment, you have the opportunity to change your:
   - Medical & Dental coverage (including the Tobacco-free Affidavit)
   - Supplemental AD&D
   - Tax Saver Benefit (TSB) spending accounts
   - Health Savings Account (HSA)

2. The elections you make during Open Enrollment will stay in place all year, unless you experience an IRS-defined qualifying life event, such as marriage or the birth of a child. An exception is that you can make changes to your HSA contribution at any time during the year.

3. If you take no action during Open Enrollment, your existing coverage options will “roll over” into 2021, with the exception of the Tax Saver Benefit plan and the Tobacco-free Affidavit premium reduction. These require an annual election to participate.

4. Use the Employee Center task at one.iu.edu to make your elections online. You can change and resubmit your elections as many times as you need until the end of Open Enrollment. With each submission you will receive a new email notice confirming your elections. Please review each notice for accuracy.

Questions? Need help?
Have questions about your benefits?
Need help with enrollment? Just ask.
812-856-1234 | askhr@iu.edu
It’s time for Open Enrollment—Your annual opportunity to review your IU benefits and make plan changes.

Open Enrollment is your annual opportunity to review your benefits, your family’s needs, and to fine-tune your benefits package to match. Many life events can occur during the year that can affect the types of plans and amount of coverage you need. Think about the changes you and your family have experienced in the past year or anticipate in the coming year. Then determine which benefit plans and programs will suit your needs best.

Enroll Online from October 26–November 6, 2020

Open Enrollment begins on Monday, October 26, 2020, and closes at 11:59 p.m. ET on Friday, November 6, 2020. During this period, you may add or remove eligible dependents and change your benefit elections, with changes going into effect on January 1, 2021. Use the checklist on page 4 of this guide to learn how and when to make your Open Enrollment elections using the Employee Center in one.iu.edu. If you do not have internet access, contact IU Human Resources for assistance.

Effective Date of Changes is January 1, 2021

All Open Enrollment changes are effective January 1, 2021. IRS regulations require that your Open Enrollment benefit elections remain in place for the entire year unless you experience an IRS-defined qualifying life event. Certain life events, such as marriage or the birth of a child, allow a corresponding change to your elections, but only within 30 days of the event. An exception is that you can make changes to your HSA contribution amount at any time during the year.

Don’t forget to bookmark the Open Enrollment website—your destination for all Open Enrollment-related materials and information!

go.iu.edu/oe
Open Enrollment Checklist

Before Open Enrollment

☐ Review the information in this guide and on the Open Enrollment website at go.iu.edu/oe.

☐ Attend a virtual Open Enrollment information session. Live and on-demand options are available (see the schedule on page 23 of this guide or at go.iu.edu/oe).

During Open Enrollment (October 26—November 6)

☐ Make your enrollment elections online:

1. Go to one.iu.edu and search for "Employee Center"
2. Select the Employee Center application.
3. Click on the Benefits tile.
4. Click the Start Open Enrollment button.
5. Enter your benefit elections for each plan:
   □ Review your medical and dental elections. You can add, change, or drop coverage as well as dependents.
   □ Complete the Tobacco-free Affidavit for yourself and your spouse (if applicable). You must complete the affidavit each year, even if you are not changing medical plans. The affidavit can be found at the bottom of the medical enrollment page.
   □ Complete the TSB Healthcare and/or Dependent Care sections, if applicable. You must re-enroll in these benefit plans each year to participate.
   □ Review your Supplemental AD&D election. You can add, change, or drop coverage.

6. Submit your elections. Your elections will not be registered for 2021 until you click Submit.

☐ Check your IU email account for confirmation. If you do not receive an immediate email confirmation, the enrollment process was not completed.

☐ Log out, especially if you are using a public or shared computer.

What happens if I don't complete online Open Enrollment?

<table>
<thead>
<tr>
<th>Benefit Plan:</th>
<th>If you do not take any action during Open Enrollment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical &amp; Dental</td>
<td>Enrollment will remain the same.</td>
</tr>
<tr>
<td>Health Savings Account (HSA)</td>
<td></td>
</tr>
<tr>
<td>Supplemental AD&amp;D</td>
<td></td>
</tr>
<tr>
<td>Tobacco-free Affidavit</td>
<td>You will not receive the $25/$50 monthly medical premium reduction in 2021.</td>
</tr>
<tr>
<td>Tax Saver Benefit (TSB) Plan</td>
<td>You will not be enrolled in the plan and no contributions will be made to your Healthcare or Dependent Care Spending Accounts.</td>
</tr>
</tbody>
</table>
Medical & Dental Coverage

All Medical Plans

• All medical plan members will be issued new ID cards. ID numbers will remain the same.
• There will be an overall 6% increase in employee contributions across all salary bands and plans. See page 9 of this guide to compare premiums by salary band, plan, and level of coverage.

Anthem PPO HDHP

• In-Network: Deductible increase: $1,700 employee-only / $3,400 all other coverage levels
  Out-of-pocket maximum increase: $3,400 employee-only / $6,800 all other coverage levels
• Out-of-Network: Deductible increase: $3,400 employee-only / $6,800 all other coverage levels
  Out-of-pocket maximum increase: $6,800 employee-only / $13,600 all other coverage levels

Anthem PPO $500 Deductible

• In-Network: In-network prescription out-of-pocket maximum increase: $6,150 individual / $9,900 family maximum

IU Health HDHP

• In-Network: Deductible increase: $2,700 employee-only / $5,400 all other coverage levels
  Out-of-pocket maximum increase: $3,400 employee-only / $6,800 all other coverage levels

IU Dental Plan

• No plan changes.
• There will be an overall 1.1% increase in employee contributions across all salary bands. See page 17 of this guide to compare premiums by salary band and level of coverage.

Savings & Spending Accounts

Health Savings Account (HSA)

Increase to IRS-defined annual contribution maximum: $3,600 employee-only / $7,200 all other coverage levels (no change to annual $1,000 age 55+ catch-up contribution)

No change to the university’s annual HSA contribution:
• IU Health HDHP: $1,600 employee-only / $3,200 all other coverage levels
• Anthem PPO HDHP: $1,300 employee-only / $2,600 all other coverage levels

Tax Saver Benefit (TSB) Plan

Healthcare Spending Account
• The annual contribution limit will increase to $2,750.
• Up to $550 can roll over to the following year.

Dependent Care Spending Account
• No plan changes.

Group Insurance

Supplemental Accidental Death & Dismemberment (AD&D)

• No plan changes.
Eligibility for Medical & Dental Coverage

Eligible Employees
Academic and Staff employees employed by Indiana University as full-time employees (75% FTE or greater) are eligible for plan membership.

J-1 Visa holders are only eligible to enroll in the Anthem PPO $500 Deductible plan due to the U.S. Department of State requirement of a deductible of $500 or less.

Eligible Dependents
A dependent cannot be covered unless the employee is covered. The following dependents are eligible for IU-sponsored health care coverage:

• your spouse; and
• your children, including biological, adopted, stepchildren, and children for which you have a legal guardianship, up to the end of the month they turn age 26; and
• your children of any age who qualify for disabled child eligibility (see hr.iu.edu/benefits/needknow.html for information on disabled child eligibility).

Points to Remember
DUAL COVERAGE
No individual is eligible for coverage under more than one IU-sponsored medical or dental plan. Ineligible coverage includes an individual covered as:

• the employee on more than one plan, or
• as both an employee and a dependent, or
• as a dependent of more than one employee.

HIGHER COMPENSATED IU SPOUSE
When you and your spouse are both eligible for IU employee coverage, you have one of two options:

1. Enroll as ‘Employee Only’ or ‘Employee with Children’ in separate plans.
2. Enroll as ‘Employee with Spouse’ or ‘Family’ in the higher compensated spouse’s health plan.

NEWBORN ELIGIBILITY
If you are enrolled in a healthcare plan, and you or your spouse has a baby, the newborn is covered for the first 31 days. To continue coverage the child must be enrolled in an IU-sponsored plan within 30 days of birth. Learn more at hr.iu.edu/bcc.

MIDYEAR CHANGES (LIFE EVENTS)
Open Enrollment benefit elections must remain in place for the entire year unless you experience an IRS-defined qualifying life event such as marriage or the birth of a child. Such an event allows a corresponding change to elections, but only within 30 days of the event. Learn more at hr.iu.edu/bcc.

DUTY TO NOTIFY OF INELIGIBILITY
The employee is responsible for notifying the university in writing within 30 days of any change that affects a dependent’s eligibility. Failure to provide timely notice to the university can jeopardize COBRA benefits and result in additional cost to the employee. There may also be tax consequences when coverage is provided for ineligible dependents.

Coordinating your Health Savings Account (HSA) with your Spouse
Please keep the following in mind if you and your spouse are enrolled in an HDHP & HSA:

• If you and your spouse are each enrolled separately in employee-only HDHP coverage, each of you are subject to the employee-only HSA contribution limit ($3,600 each).

• If either you or your spouse has family HDHP coverage (employee with children or family coverage), you will be subject to the family HSA contribution limit ($7,200) as a couple. This means that if either you or your spouse cover family members on your HDHP, your combined HSA contribution limit is the annual maximum for family coverage ($7,200).

• Additionally, if you or your spouse are age 55 or older, you may contribute up to an additional $1,000 to your individual accounts each year. This is known as a "catch-up contribution."

• Learn more about HSA contributions and limits on page 12.
Choosing a Medical Plan

Preventive Care Services are Covered at No Cost
Preventive care services are covered at no cost (1) when network providers are used and (2) when services are consistent with the U.S. Preventive Services Task Force guidelines and nationally recognized schedules. Preventive care services may include:

- Routine and periodic wellness exams.
- Routine immunizations for adults and children.
- Screening tests such as mammograms, bone density testing, PSA and cholesterol labs.
- Women’s health services including oral contraceptives, IUDs, hormone implants, injections, and sterilization.
- Pediatric fluoride, low dose aspirin, and tobacco cessation products (up to certain limits).

More information, including an extended list of preventive services, can be found at go.iu.edu/oe.

Medical Plan Similarities
- No pre-existing condition limits or waiting periods.
- Services are comprehensive and include medical, prescription, behavioral health, transplants, durable medical equipment, home health care, skilled nursing, therapy, and chiropractic services.
- Preventive services are covered at 100% when in-network providers are used.
- Each plan includes a vision care benefit.
- Each plan has annual out-of-pocket maximums for individual and family levels. Once the maximum is met, each plan pays 100% for in-network covered services for the remainder of the year.
- No lifetime maximum benefit on medical services.

Medical Plan Differences
- **Premiums.** The higher the deductible, the lower the premiums.
- **Provider networks.** The PPO plans have a nationwide network and provide out-of-network benefits. The IU Health HDHP is an exclusive network with limited or no out-of-network benefits.
- **Deductible and prescription benefits.** How the deductible and prescription benefit are structured in an HDHP versus a traditional plan.
- **Out-of-pocket expenses/maximums** Deductibles, coinsurance, and copays vary in structure and amounts.
- **HSA.** A unique tax-advantaged health savings account (HSA) is available to those enrolled in an HDHP.

Understanding In- and Out-of-Network
Using in-network providers is key to receiving the highest level of healthcare benefits. Services from a provider other than an in-network one are considered out-of-network, except for emergency or urgent care away from home.

An exclusive provider plan, such as the IU Health HDHP, does not cover out-of-network services other than emergency care, urgent care when away from home, certain children living outside Indiana, and services authorized by the plan in advance.

**IN-NETWORK**
- Lower out-of-pocket costs (e.g. deductible and coinsurance).
- Deductibles, coinsurance, and out-of-pocket maximums are lower.
- The member is not responsible for charges above the plan’s allowed amounts.
- Preventive services are paid at 100%.
- Services requiring approval are authorized in advance.

**OUT-OF-NETWORK**
- Higher out-of-pocket costs (e.g. deductible and coinsurance).
- Deductibles, coinsurance, and out-of-pocket maximums are higher and separate from in-network deductible and out-of-pocket maximum.
- The member is responsible for charges above the plan’s allowed amounts—these charges can be significant.
- Preventive services are not paid at 100%.
- Out-of-network providers are not required to authorize services in advance. The member may have to request authorization or risk being responsible for charges.
- When emergency or urgent care services from out-of-network providers are covered with in-network deductibles and coinsurance, the member is still responsible for charges above the allowed amount. These can be significant.
How the Deductibles Work

ANTHEM PPO HDHP & IU HEALTH HDHP
For HDHPs, as each family member incurs medical expenses, the amount paid toward these expenses is credited to the family’s deductible. When these individual expenses add up to the family deductible, the plan will begin paying its share of the cost of healthcare expenses for members of the family.

The family deductible can be satisfied by one or more family members. This means that when you cover members of your family, there is no individual deductible—only the family deductible must be met before the plan pays its share of the cost of healthcare expenses for any family member.

What Services Apply to This Plan’s Deductible?
All covered services, including prescriptions, are subject to the deductible (except for preventive services and prescriptions).

ANTHEM PPO $500 DEDUCTIBLE
For this type of plan, each family member has an individual deductible and the family as a whole has a family deductible. As medical expenses are incurred, the amount each family member pays toward these expenses is credited to their individual deductible and to the family deductible.

There are two ways the plan will begin to pay its share of the cost of healthcare expenses for a particular individual within the family.

• If an individual meets his or her individual deductible, the plan begins to pay its share of the cost of healthcare expenses for that individual only, but not for the other family members.

• If the family deductible is met, the plan begins to pay its share of the cost of healthcare expenses for all members of the family whether or not they’ve met their own individual deductibles.

Each enrollee may contribute no more than the amount of the individual deductible to the family deductible.

What Services Apply to This Plan’s Deductible?
The deductible applies to all covered medical services except emergency room and in-network urgent care centers, preventive care, prescription drugs (except drugs administered in a physician’s office), and transplants.

Choosing a Medical Plan

Tobacco-Free Affidavit
$25–$50 MEDICAL PREMIUM REDUCTION

During Open Enrollment you can complete an affidavit indicating you and/or your spouse do not use tobacco and will not in the future. Completing the affidavit will reduce your medical plan premium contribution by $25 per month for you or your spouse, or $50 for both.

For purposes of the affidavit, tobacco includes any form of tobacco or nicotine products that are smoked, applied to the gums, and/or inhaled (e.g. e-cigarettes, nicotine delivery systems).

As an alternative to completing the affidavit, you and/or your spouse may receive the premium reduction by completing the Quit For Life® tobacco cessation program. Program completion is defined as completing at least five calls with a Quit Coach. Participants will receive the premium reduction upon certification that the required coaching calls have been completed.

QUIT FOR LIFE® TOBACCO CESSATION PROGRAM
Medical benefits cover the cost of the Quit For Life® tobacco cessation program. The benefit is available to all full-time Academic and Staff employees and spouses covered by an IU-sponsored medical plan, and is fully paid by the university. The program includes an individualized telephone-based cessation program for each participant; a Quit Coach assigned to each participant; nicotine replacement therapy, as needed; and one year of follow-up phone and web assistance to help participants stay tobacco free.

To enroll or learn more, visit www.quitnow.net/iu or call 866-784-8454.
For the 2021 plan year there will be an overall 6% increase in employee contributions across all salary bands and plans. The "Total Monthly Premium" column below includes your contribution and the university's contribution to the medical plan on your behalf.

<table>
<thead>
<tr>
<th>ANNUAL BASE SALARY*</th>
<th>Below $35,000</th>
<th>$35,000 to $59,999</th>
<th>$60,000 to $99,999</th>
<th>$100,000 to $149,999</th>
<th>$150,000 to $199,999</th>
<th>$200,000 to $249,999</th>
<th>$250,000 &amp; Above</th>
<th>Total Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EMPLOYEE ONLY</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IU Health HDHP</td>
<td>$36.83</td>
<td>$49.38</td>
<td>$64.57</td>
<td>$81.46</td>
<td>$99.01</td>
<td>$120.64</td>
<td>$140.09</td>
<td>$328.46</td>
</tr>
<tr>
<td>Anthem PPO HDHP</td>
<td>$43.77</td>
<td>$58.58</td>
<td>$76.22</td>
<td>$96.02</td>
<td>$116.56</td>
<td>$141.95</td>
<td>$164.74</td>
<td>$385.98</td>
</tr>
<tr>
<td>Anthem PPO $500 Deductible</td>
<td>$153.62</td>
<td>$185.67</td>
<td>$240.45</td>
<td>$287.12</td>
<td>$335.53</td>
<td>$385.76</td>
<td>$437.85</td>
<td>$923.95</td>
</tr>
<tr>
<td><strong>EMPLOYEE W/CHILD(REN)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IU Health HDHP</td>
<td>$66.30</td>
<td>$88.90</td>
<td>$116.25</td>
<td>$146.63</td>
<td>$178.20</td>
<td>$217.14</td>
<td>$252.15</td>
<td>$628.44</td>
</tr>
<tr>
<td>Anthem PPO HDHP</td>
<td>$78.78</td>
<td>$105.44</td>
<td>$137.22</td>
<td>$172.84</td>
<td>$209.80</td>
<td>$255.50</td>
<td>$296.53</td>
<td>$738.48</td>
</tr>
<tr>
<td>Anthem PPO $500 Deductible</td>
<td>$276.52</td>
<td>$334.22</td>
<td>$432.82</td>
<td>$516.82</td>
<td>$603.94</td>
<td>$694.36</td>
<td>$788.14</td>
<td>$1,755.49</td>
</tr>
<tr>
<td><strong>EMPLOYEE W/SPOUSE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IU Health HDHP</td>
<td>$97.61</td>
<td>$130.87</td>
<td>$171.14</td>
<td>$215.87</td>
<td>$262.36</td>
<td>$319.69</td>
<td>$371.23</td>
<td>$874.85</td>
</tr>
<tr>
<td>Anthem PPO HDHP</td>
<td>$116.00</td>
<td>$155.22</td>
<td>$202.01</td>
<td>$254.46</td>
<td>$308.89</td>
<td>$376.16</td>
<td>$436.57</td>
<td>$1,028.02</td>
</tr>
<tr>
<td>Anthem PPO $500 Deductible</td>
<td>$407.10</td>
<td>$492.05</td>
<td>$637.23</td>
<td>$760.88</td>
<td>$889.13</td>
<td>$1,022.26</td>
<td>$1,160.34</td>
<td>$2,448.45</td>
</tr>
<tr>
<td><strong>FAMILY</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IU Health HDHP</td>
<td>$117.87</td>
<td>$158.02</td>
<td>$206.65</td>
<td>$260.68</td>
<td>$316.80</td>
<td>$386.03</td>
<td>$448.28</td>
<td>$990.57</td>
</tr>
<tr>
<td>Anthem PPO HDHP</td>
<td>$140.07</td>
<td>$187.45</td>
<td>$243.93</td>
<td>$307.27</td>
<td>$372.99</td>
<td>$454.24</td>
<td>$527.17</td>
<td>$1,164.02</td>
</tr>
<tr>
<td>Anthem PPO $500 Deductible</td>
<td>$491.59</td>
<td>$594.15</td>
<td>$769.47</td>
<td>$918.78</td>
<td>$1,073.67</td>
<td>$1,234.42</td>
<td>$1,401.14</td>
<td>$2,771.84</td>
</tr>
</tbody>
</table>

*Salary band is determined by your annual base salary at the time payroll runs each month. For School of Medicine full-time faculty who receive a portion of their pay from an IU Health or VA paycheck, annual base salary includes both IU base salary and certain IU Health fixed and/or variable compensation, as determined by the School of Medicine.

**CALCULATING YOUR PREMIUM**
Malcom is enrolled in the Anthem PPO HDHP plan with coverage for himself and his spouse. His annual salary is $51,548, and he has submitted a Tobacco-free Affidavit for himself and his spouse.

- $155.22 Employee w/Spouse Premium
- $25.00 Tobacco-free Affidavit from Employee
- $25.00 Tobacco-free Affidavit from Spouse

**Monthly Premium**

**CALCULATING THE UNIVERSITY’S PREMIUM CONTRIBUTION**
The university’s contribution is the difference between the total monthly premium and the employee contribution.

$1,028.02 Total Premium
- $155.22 Monthly Employee Premium

$872.80 Monthly University Contribution*

*Remember: The university also contributes annually to the employee’s HSA in the Anthem PPO HDHP & the IU Health HDHP. For specific amounts, see the Medical Plans Comparison Chart on the next page.
**Understanding Medical Plan Terms**

<table>
<thead>
<tr>
<th>Medical Plan Terms</th>
<th>IU Health HDHP</th>
<th>Anthem PPO HDHP</th>
<th>Anthem PPO $500 Deductible</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Network Availability</strong></td>
<td>Most Indiana counties. Visit iuhealthplans.org for a provider list.</td>
<td>Nationwide and Overseas</td>
<td>Nationwide and Overseas</td>
</tr>
<tr>
<td><strong>Provider Network</strong></td>
<td>Only from IU Health network providers</td>
<td>Anthem Blue Access PPO and BCBS Global Core providers</td>
<td>Anthem Blue Access PPO and BCBS Global Core providers</td>
</tr>
<tr>
<td><strong>HSA Contributions</strong></td>
<td>IU Contribution: $5,600 employee-only, $3,200 all other coverage levels</td>
<td>IU Contribution: $1,300 employee-only, $2,600 all other coverage levels</td>
<td>Not Eligible</td>
</tr>
<tr>
<td><strong>Employee Contribution</strong></td>
<td>Minimum $300 ($25 monthly)</td>
<td>Minimum $300 ($25 monthly)</td>
<td></td>
</tr>
<tr>
<td><strong>Copayment</strong></td>
<td>Maximum $2,000 employee-only / $4,000 all other coverage levels</td>
<td>Maximum $2,300 employee-only / $4,600 all other coverage levels</td>
<td></td>
</tr>
<tr>
<td><strong>Allowed amounts</strong></td>
<td>For those age 55+, additional $1,000 catch up</td>
<td>For those age 55+, additional $1,000 catch up</td>
<td></td>
</tr>
</tbody>
</table>

**MEDICAL**

<table>
<thead>
<tr>
<th>Deductible</th>
<th>In-Network</th>
<th>Out-of-Network</th>
<th>In-Network</th>
<th>Out-of-Network</th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$2,700 employee-only, $5,400 all other coverage levels</td>
<td>$1,700 employee-only, $3,400 all other coverage levels</td>
<td>$500 individual, $1,500 family</td>
<td>$900 individual, $2,700 family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Out-of-Pocket Maximum (OPDM)</td>
<td>$3,400 employee-only, $6,800 all other coverage levels</td>
<td>$3,400 employee-only, $6,800 all other coverage levels</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Office Visits**

<table>
<thead>
<tr>
<th>In-Network</th>
<th>Out-of-Network</th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>20% after deductible</td>
<td>No out-of-network benefits, except emergency</td>
<td>20% after deductible</td>
<td>40% after deductible</td>
</tr>
<tr>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>40% after deductible</td>
</tr>
<tr>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

**Preventive Services**

<table>
<thead>
<tr>
<th>Mental Health</th>
<th>Covered as any other illness through IU Health network.</th>
<th>Covered as any other illness through IU Health network.</th>
<th>Covered as any other illness through IU Behavioral Health.</th>
</tr>
</thead>
</table>

**Out-of-Network**

Benefits for covered services rendered by non-contracted physicians and hospitals. Users of in-network providers receive greater benefits for services.

**Out-of-Network**

Benefits for covered services rendered by non-contracted physicians and hospitals. PPO plans cover services both in and out of network. Exclusive provider network plans (i.e. IU Health HDHP) do not cover out-of-network providers except for emergency care away from home.

**Preferred Provider Organization (PPO)**

A medical plan that uses a network of contracted physicians and facilities to provide services at discounted rates. A PPO gives members the option of using providers outside the network but with a separate deductible, and higher coinsurance and balance billing for charges in excess of the allowed amount.

**Specialty drugs**

High cost, scientifically engineered drugs that are usually injected or infused.
Plan Highlights

The Health Savings Account (HSA), administered by The Nyhart Company, is a tax-advantaged account that can be used to pay for IRS-qualified health expenses for you, your spouse, and your tax dependents. After you open an HSA, you can use funds to pay for medical, dental, and vision plan deductibles and coinsurance, office visits, prescriptions, and much more.

The three main tax advantages to an HSA are:
- No taxes are taken on contributions
- No taxes are taken when funds are used for IRS-qualified health expenses
- No taxes are taken on the account interest or investment earnings.

HSAs can also be used as a long-term savings vehicle. Funds in the account roll over and accrue interest tax-free, and funds above a $1,000 balance in the cash account can be invested. All initial investing and any trades can be done online at any time, and the earnings on your HSA investments, if any, are tax-free.

HSA Eligibility

To be eligible to make tax-free HSA contributions, you must be covered on a high deductible health plan (HDHP) and:
1. have a valid Social Security Number; and
2. not be claimed as a dependent on someone else’s tax return; and
3. not be enrolled in Medicare or Tricare, or have received VA medical services (other than preventive) within the last 3 months; and
4. have no other medical coverage.

Your spouse can have other medical coverage, but you cannot be covered on your spouse’s non-HDHP medical plan, HRA, or unrestricted healthcare FSA/TSB plan and still be eligible to make tax-free HSA contributions.

If you are ineligible for tax-free contributions, you can waive the HSA and still elect to enroll in an HDHP.

If you are ineligible for tax-free contributions and still elect the HSA, you are responsible for reporting the ineligible HSA contributions on your annual tax return. Consulting a tax advisor about reporting ineligible contributions is advised.

2021 Maximum HSA Contributions

<table>
<thead>
<tr>
<th>ANTHEM PPO HDHP</th>
<th>IRS Max. Annual Contribution</th>
<th>IU Annual Contribution</th>
<th>Your Max. Annual Contribution</th>
<th>Your Max. Annual Contribution if Age 55 or Older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee-only</td>
<td>$3,600</td>
<td>$1,300</td>
<td>$2,300</td>
<td>$3,300</td>
</tr>
<tr>
<td>All Other Coverage Levels</td>
<td>$7,200</td>
<td>$2,600</td>
<td>$4,600</td>
<td>$5,600</td>
</tr>
<tr>
<td>IU HEALTH HDHP</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee-only</td>
<td>$3,600</td>
<td>$1,600</td>
<td>$2,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>All Other Coverage Levels</td>
<td>$7,200</td>
<td>$3,200</td>
<td>$4,000</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

IMPORTANT CONSIDERATIONS FOR SPOUSES

If you and your spouse are both eligible for the HSA, it is imperative that you coordinate your contributions:
- If you and your spouse are each enrolled separately in employee-only HDHP coverage, each of you are subject to the employee-only HSA limit ($3,600 each).
- If either you or your spouse has family HDHP coverage (employee with children or family coverage), then you will be subject to the family contribution limit ($7,200) as a couple. In other words, if either you or your spouse cover family members on your HDHP, your combined HSA contributions cannot exceed $7,200.

Remember, those turning age 55 or older during the year may contribute up to an additional $1,000 each year to the HSA (make a “catch-up contribution”). You and your spouse can each make the $1,000 catch-up contribution, but you must deposit the funds into separate accounts. This means that in order for both you and your spouse to elect the catch-up, you must enroll in separate HDHPs and you must each have your own HSA.
Contributions to the HSA

UNIVERSITY CONTRIBUTION
IU makes its full annual contribution to your HSA on your second paycheck in January. University contribution amounts are listed in the table at the bottom of page 12.

YOUR CONTRIBUTION
You are required to make a minimum $300 annual contribution to your HSA through pre-tax payroll deductions. You can make additional contributions up to the IRS-allowed maximum (see the table on page 12). Your annual election is spread out over each of your paychecks and can be changed at any time during the year.

It’s important to remember that the maximum amount you may contribute can be affected by your spouse’s HSA contributions and any Archer MSA contributions. HSA contribution maximums may be prorated by the IRS if your HDHP enrollment is less than twelve months or if your coverage level changes mid-year. Details on calculating the IRS prorated maximum can be found in IRS Pub. 969.

Eligible HSA Expenses
The HSA can be used tax-free for healthcare expenses incurred by you, your spouse, or your IRS-qualified tax dependents, even if they are not covered on your HDHP. Examples of eligible expenses include:

- medical, dental, and vision deductibles and coinsurance
- prescriptions
- medical equipment and supplies
- acupuncture
- disability aids and hearing aids
- travel to and from medical services
- nursing home and home health care
- dental and orthodontia services
- eyeglasses or contacts

To find additional eligible expenses, visit the IU Benefits website at hr.iu.edu/benefits/medical-plans/hsa.html.

Accessing HSA Funds
Once HSA contributions are made, funds can be accessed in several different ways:

- **IU Benefit Card.** Pay your healthcare provider with the IU Benefit card, a debit-type Visa card automatically sent to all HSA enrollees.
- **Online.** Use the 'Make an HSA Transaction' feature to pay a healthcare provider online or to reimburse yourself for eligible expenses you pay out-of-pocket.

How Does the HSA Work?

1. **Make tax-free contributions.**
   An HSA comes with tax advantages that can make saving in an HSA a smart choice now and in the future.
   - Your contributions to the HSA are tax-free.
   - IU contributions to your HSA are tax-free.
   - Interest and investment earnings are tax-free.

2. **Use tax-free HSA funds to pay for qualified healthcare expenses.**
   Cover things like medical expenses, prescriptions, vision, behavioral health care, and dental services for you, your spouse, and your tax dependents.

3. **Change your contribution at any time.**
   Lower your contribution rate when you’re tight on cash, and contribute more when you have more dispensable income—like after you pay off your car.

4. **Let your money roll over and grow over time.**
   Watch your money accumulate interest and increase in your account OR open an investment account and invest in a wide range of mutual funds. All initial investing and any trades can be done online at any time and the earnings on your HSA investments, if any, are tax-free.

5. **Take it with you when you leave IU or retire.**
   The funds in your account are yours to keep until you spend them, even when you leave the plan, change jobs, or retire. If you continue to use your funds to pay for qualified medical expenses, that money is tax-free. If you use the funds for anything else, that money is considered taxable income and will be subject to a 20% penalty if you are under age 65.
Important

- You must re-enroll to participate in 2021
- Annual contribution limit = $2,750
- Annual carryover = $550

Plan Highlights

The TSB Healthcare Spending Account allows you to set aside tax-free money to be used for certain IRS-eligible medical, dental, or vision expenses not covered by insurance for you, your spouse, and your eligible dependents (children through age 25, even if they are not covered on your medical plan, are married, or are living away from home).

Contributions are elected on an annual calendar year basis and cannot be changed during the year unless you experience an IRS-defined qualifying life event.

The 2021 annual contribution limit is $2,750. The annual election amount is available starting January 1, 2021. Enrollment is required each year to participate.

To be reimbursed from your account, the expenses you claim must be eligible under IRS regulations, incurred during the tax year (January 1 through December 31), and submitted to Nyhart by the following February 28.

Special rules and restrictions apply when you and/or your spouse are enrolled in both the Health Savings Account (HSA) and the TSB Healthcare Spending Account. For more information see page 15 of this guide.

Carryover Provision

Up to $550 of unused TSB Healthcare account funds are able to be carried over to the following plan year. Any funds in the account at the end of the plan year in excess of $550 are forfeited.

Direct Deposit Requirement

Participants in the TSB Healthcare Spending Account are required to complete a Direct Deposit Authorization before reimbursements can be sent from the TSB account. Forms are available at iu.nyhart.com.

When determining your annual pledge to the TSB Healthcare account, a review of recent medical bills can give you an idea of costs you might expect to have. Or, if you receive regular medical care or use medication daily, you can estimate those costs with some certainty. Also think about what costs you can plan for like eyeglasses or orthodontia. Don’t put money in your account for anything but predictable expenses—any money left in your account above the $550 carryover will be forfeited.

Eligible Healthcare Expenses

ELIGIBLE EXPENSES:
- deductibles and coinsurance
- prescriptions
- over-the-counter medicines (cold/flu, allergy, pain medications, etc.)
- menstrual products
- hearing aids and related expenses
- dental care and orthodontia
- acupuncture
- transportation costs to/from medical services
- vision exams, prescription lenses, frames, contacts, and vision surgery

NON-ELIGIBLE EXPENSES:
The following are examples of expenses not allowed by IRS regulations:
- HDHP Plan deductible
- over-the-counter vitamins and supplements
- cosmetic procedures
- exercise equipment (unless accompanied by a medical diagnosis and a prescription)

Visit hr.iu.edu/benefits/tsb.html for a list of eligible expenses.
Coordinating Your HSA & TSB Healthcare Spending Accounts

IU Benefit Card (Debit/VISA)

The IU Benefit Card allows you to pay for purchases and services from either your TSB Healthcare Spending Account, Health Savings Account (HSA), or both.

All participants in the TSB Healthcare plan and the HSA will automatically receive an IU Benefit Card. The card is effective for three years, and new cards are automatically reissued as they expire. The card does not apply to the TSB Dependent Care Account.

Using the IU Benefit Card

The IU Benefit Card can only be used at eligible health care merchants such as a medical, dental, or vision provider’s office, retail pharmacy, or mail order pharmacy. The use of the card at ineligible merchants will result in the charge being denied.

There are times when an expense is an IRS-qualified healthcare expense, but it is purchased at a non-healthcare merchant. For example, transportation costs to and from medical services are an eligible expense, but the card cannot be used at a gas station. In situations like this, you can still use your HSA or TSB funds for these expenses; however, you will need to pay for the expense out-of-pocket then reimburse yourself from your HSA or submit a claim for reimbursement from your TSB account.

Coordinating the HSA and TSB Healthcare Spending Accounts

When enrolled in both accounts, TSB funds can only be used for dental and vision expenses until the annual HDHP deductible is met. Once the deductible is met, and proof of meeting the deductible has been provided to Nyhart, then funds in the TSB can then be used for medical and prescription expenses from that date forward.

When the IU Benefit Card is used at a medical or pharmacy provider, the funds will be drawn from the HSA. When used at a dental or vision provider, the funds will be drawn from the TSB. Once proof of meeting the annual HDHP deductible is submitted to Nyhart, the IU Benefit Card will automatically draw all expenses from the TSB first, then from the HSA once TSB funds are exhausted. Participants also have the option to pay for expenses out-of-pocket, then submit a claim for reimbursement to Nyhart.

HSA and TSB Healthcare Side-by-Side Comparison

REMEMBER: You can enroll in both the HSA and the TSB Healthcare Spending Account, however, when enrolled in both accounts TSB Healthcare funds can only be used for dental and vision expenses until your HDHP deductible has been met for the year. For additional information on the coordination of these two accounts, review IRS Publication 969.

<table>
<thead>
<tr>
<th></th>
<th>HSA</th>
<th>TSB HEALTHCARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance Rollover</td>
<td>Yes. Balance rolls over year-to-year</td>
<td>Can only roll over up to $550 to the next year</td>
</tr>
<tr>
<td>Interest/Investment Options</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Availability of Funds</td>
<td>Contributions only available as deposited</td>
<td>Full pledge available immediately</td>
</tr>
<tr>
<td>Mid-Year Contribution Changes</td>
<td>Can change contribution amount any time during the year</td>
<td>Cannot change pledge amount without specific IRS-qualifying life event</td>
</tr>
<tr>
<td>Claim Forms</td>
<td>No claims forms—retain receipts for IRS purposes</td>
<td>Must submit claim forms for reimbursement and be able to substantiate purchases made with the card</td>
</tr>
<tr>
<td>Incurring Expenses</td>
<td>Can use the funds for expenses incurred as far back as the original date the account was opened</td>
<td>Have 60 days after the plan year to submit claims for expenses incurred January–December</td>
</tr>
<tr>
<td>Using Funds for Family Members</td>
<td>Only for true IRS tax dependents (e.g. spouses, qualified children under age 19 or 24 if a student, etc.)</td>
<td>For spouses and children up to age 25, even those who are married and living away from home</td>
</tr>
<tr>
<td>Connection to IU</td>
<td>Your HSA follows you, even when you leave IU or retire.</td>
<td>Participation in the TSB ends when you leave your job at IU or retire.</td>
</tr>
</tbody>
</table>
Important

• You must re-enroll to participate in 2021
• Annual contribution limit = $5,000

Plan Highlights

The TSB Dependent (Day/Evening) Care Spending Account allows you to set aside tax-free money for day care expenses for your dependents that allow you and your spouse to work.

Contributions are elected on an annual calendar year basis. Annual elections cannot be changed during the year unless you experience an IRS-defined qualifying life event.

The 2021 annual contribution limit is $5,000 per household. Spouses can each elect participation in the TSB Dependent Care account, but their combined elections cannot exceed $5,000 ($2,500 each for married employees who file their taxes separately). The annual election amount is available starting January 1, 2021; therefore, money can be taken out before it is put in through payroll deduction.

Enrollment is required each year in the TSB Spending accounts in order to participate. Participation is not automatic.

In order to be reimbursed from your account, the expenses you claim must be eligible under IRS regulations, incurred during the tax year (January 1 through December 31), and submitted to Nyhart by the following April 15th. Daycare services cannot be reimbursed before they are incurred, even when the daycare provider requires payment in advance.

Unused 2021 TSB Dependent Care contributions are forfeited under IRS regulations. They cannot be “rolled over” beyond the plan year, nor can they be moved between accounts.

Eligible Dependents

• Children—tax dependents under the age of 13.
• Spouse—who is physically or mentally unable to care for themselves.
• Elders/Adults—tax dependents who are physically or mentally unable to care for themselves.

Direct Deposit Requirement

Participants in the TSB Dependent Care Spending Account are required to complete a Direct Deposit Authorization form before reimbursements can be sent from the account. Forms are available at iu.nyhart.com.

Examples of Eligible Expenses

The following are examples of IRS-allowed expenses:

• Expenses for a child in nursery school, preschool, or similar program for children below the level of kindergarten.
• Expenses for before- or after-school care of a child in a kindergarten or higher grade.
• Household services to a household employee whose services include the care of a qualifying person.
• Summer camp (for children under age 13) during work hours.

Expenses NOT Allowed by the IRS

The following are examples of expenses not allowed by IRS regulations:

• Expenses paid for but not yet incurred
• Kindergarten or private school tuition
• Overnight camp
• Summer school or tutoring programs

Use the Dependent Care worksheet at hr.iu.edu/benefits/tsb.html to help calculate your annual TSB Dependent Care Spending Account contribution.
Plan Highlights

You may elect dental coverage with or without electing medical coverage. This also means that eligible dependents who are not enrolled in medical coverage may be enrolled in dental coverage as long as you are enrolled.

Members may receive dental care from any licensed dentist. However, you will receive a higher level of benefits when covered services are obtained from a Total Cigna PPO Network dentist.

Coverage Summary

TOTAL CIGNA PPO NETWORK DENTIST
- Two routine exams/cleanings per year are covered at 100%.
- There is an annual $25 deductible (not applied to preventive care).
- Other services are covered at 50% up to the annual benefit limit.

NON-NETWORK DENTIST
- Two routine exams/cleanings per year are covered at 100% of allowed charges.
- There is an annual $25 deductible.
- Other services are covered at 50% up to the annual benefit limit.
- The member is responsible for amounts above allowed charges.

Annual Benefit Limit

The IU Dental Plan has an initial annual benefit limit of $1,200 per covered member. For each member who receives at least one preventive cleaning/exam per calendar year, the annual benefit limit will increase by $100 in the subsequent year, up to a maximum of $1,500. Child orthodontia is covered up to a $1,000 lifetime limit.

ANNUAL BENEFIT LIMIT EXAMPLE:

<table>
<thead>
<tr>
<th>YEAR</th>
<th>ANNUAL BENEFIT LIMIT</th>
<th>PREVENTIVE CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Year</td>
<td>$1,200 (base)</td>
<td>1 cleaning</td>
</tr>
<tr>
<td>2nd Year</td>
<td>$1,300</td>
<td>1 cleaning</td>
</tr>
<tr>
<td>3rd Year</td>
<td>$1,400</td>
<td>No cleaning</td>
</tr>
<tr>
<td>4th Year</td>
<td>$1,400</td>
<td>1 cleaning</td>
</tr>
<tr>
<td>5th Year</td>
<td>$1,500 (max)</td>
<td>1 cleaning</td>
</tr>
</tbody>
</table>

Exclusions & Limitations

- Some services are excluded from coverage (e.g. cosmetic procedures).
- There are limits on the number and frequency of some services (e.g. the number of routine cleanings is limited to two per year).
- Some services are limited by age (e.g. orthodontia is limited to children age 18 or under).

Monthly Premiums

Your contribution is deducted before taxes. Your salary band is determined by your annual base salary at the time each payroll is run. The plan contributions listed below are configured to reflect the difference between the total premium and the university’s contribution amount.

<table>
<thead>
<tr>
<th>ANNUAL BASE SALARY*</th>
<th>Total Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below $35,000</td>
<td>$8.28</td>
</tr>
<tr>
<td>$35,000 to $59,999</td>
<td>$10.38</td>
</tr>
<tr>
<td>$60,000 and Above</td>
<td>$12.33</td>
</tr>
<tr>
<td></td>
<td>$39.01</td>
</tr>
<tr>
<td></td>
<td>$14.90</td>
</tr>
<tr>
<td></td>
<td>$18.71</td>
</tr>
<tr>
<td></td>
<td>$22.19</td>
</tr>
<tr>
<td></td>
<td>$70.24</td>
</tr>
<tr>
<td></td>
<td>$19.44</td>
</tr>
<tr>
<td></td>
<td>$24.43</td>
</tr>
<tr>
<td></td>
<td>$28.94</td>
</tr>
<tr>
<td></td>
<td>$91.63</td>
</tr>
<tr>
<td></td>
<td>$28.35</td>
</tr>
<tr>
<td></td>
<td>$35.61</td>
</tr>
<tr>
<td></td>
<td>$42.20</td>
</tr>
<tr>
<td></td>
<td>$133.64</td>
</tr>
</tbody>
</table>

* The employee’s salary band is determined by the annual base salary at the time payroll runs each month. For School of Medicine full-time faculty who receive a portion of their pay from an IU Health or VA paycheck, annual base salary includes both IU base salary and certain IU Health fixed and/or variable compensation, as determined by the School of Medicine.
Plan Highlights
Supplemental AD&D is available for employee-only or family coverage, in eleven coverage amounts from $30,000 to $500,000.

Coverage is provided to members 24 hours a day, 365 days a year, for injuries caused by accidents that occur on or off the job, at home, and while traveling by plane, train, or automobile (except as limited by exclusions).

Accident benefits include payments for:
- Accidental death
- Irreversible paralysis
- Dismemberment
- Coma
- Partial tuition reimbursement for your surviving children
- Partial tuition reimbursement to help your surviving spouse return to the workforce
- Child care expense reimbursement

Eligibility

ELIGIBLE EMPLOYEES
Active full-time Academic (including IU Residents) and Staff employees are eligible to enroll in the plan.

ELIGIBLE FAMILY MEMBERS
You may also elect Supplemental AD&D coverage for your eligible dependents including your spouse and dependent children from live birth through age 25. Coverage for disabled dependents may be kept in force beyond the age limit if proof of total disability is provided within 31 days of the date when coverage would have ended due to the age limit.

Eligible Family Members include your spouse and dependent children from live birth through age 25.

Please note, to be eligible for coverage, dependents cannot be full-time members of the armed forces of any country, cannot be insured by more than one employee, and cannot be insured as both an individual and a dependent.

Benefit Amounts
You may elect Supplemental AD&D coverage in one of the following amounts: $30,000, $60,000, $90,000, $120,000, $180,000, $240,000, $300,000, $350,000, $400,000, $450,000 or $500,000.

You may elect employee-only coverage or family coverage, which includes coverage for your spouse and child(ren).

The benefit amount for each dependent is as follows:
- Spouse only—60% of your coverage
- Children only—20% of your coverage for each child, not to exceed $50,000
- Spouse and children—50% of your coverage for your spouse and 15% of your coverage for each child

The benefit amount payable is a percentage of the AD&D insurance benefit in effect on the date of the accident and is determined by the loss suffered. Specific percentage payable amounts can be found in the plan booklet available at hr.iu.edu/benefits/pai.html.

Monthly Plan Contributions
Premiums are entirely paid by the employee and deducted before taxes.

<table>
<thead>
<tr>
<th>Benefit Amount</th>
<th>Employee Only Coverage</th>
<th>Employee and Family Coverage*</th>
</tr>
</thead>
<tbody>
<tr>
<td>$30,000</td>
<td>$0.42</td>
<td>$0.72</td>
</tr>
<tr>
<td>$60,000</td>
<td>$0.84</td>
<td>$1.44</td>
</tr>
<tr>
<td>$90,000</td>
<td>$1.26</td>
<td>$2.16</td>
</tr>
<tr>
<td>$120,000</td>
<td>$1.68</td>
<td>$2.88</td>
</tr>
<tr>
<td>$180,000</td>
<td>$2.52</td>
<td>$4.32</td>
</tr>
<tr>
<td>$240,000</td>
<td>$3.36</td>
<td>$5.76</td>
</tr>
<tr>
<td>$300,000</td>
<td>$4.20</td>
<td>$7.20</td>
</tr>
<tr>
<td>$350,000</td>
<td>$4.90</td>
<td>$8.40</td>
</tr>
<tr>
<td>$400,000</td>
<td>$5.60</td>
<td>$9.60</td>
</tr>
<tr>
<td>$450,000</td>
<td>$6.30</td>
<td>$10.80</td>
</tr>
<tr>
<td>$500,000</td>
<td>$7.00</td>
<td>$12.00</td>
</tr>
</tbody>
</table>

*For Employee and Family Coverage, benefits for family members will be a percentage of the Benefit Amount selected.
SupportLinc Employee Assistance Program (EAP)

SupportLinc.com | 888-881-LINC (5462)

Problems are a part of everyday life, but when they become a distraction, it may be time to speak to a SupportLinc counselor. They can help identify and address issues or difficulties, and help you plan strategies for managing them.

Eligible employees and their household members have access to SupportLinc services at no cost, including:

- 24/7/365 telephone access to licensed counselors for in-the-moment support
- Up to six (6) face-to-face counseling sessions per presenting issue (in-person or virtual)
- Access to SupportLinc’s comprehensive technology suite including their web portal, video counseling platform, and mobile apps
- Expert referrals for local service providers including child and elder care, home repair, pet care, housing needs, and more
- Financial and legal planning support and consultations

SupportLinc is available 24/7/365 by calling 888-881-LINC (5462) or by visiting SupportLinc.com and entering the username iu.

For additional information, and a full list of services and access points, visit hr.iu.edu/benefits/eap.html.

24-Hour Nurse Line
800-337-4770

The 24-Hour Nurse Line is a resource for employees and family members who need guidance on non-emergency health questions and concerns from registered nurses. Eligible users include IU employees and their household members covered by an IU-sponsored medical plan.

Care@Work—Child & Elder Care
iu.care.com | 855-781-1303

Care@Work is a resource for finding and hiring pre-screened caregivers and care companies for childcare, eldercare, pet care, home assistants, backup care, and more. Eligible employees have access to a premium membership to find, book, and pay caregivers; senior care planning services; and backup care services. The university pays for the membership fees, but members pay the full cost of caregivers hired. Activate and use your benefit by registering at iu.care.com.

CVS Caremark
Caremark.com

IU-sponsored medical plan participants can use Caremark.com or the Caremark app to create a CVS Caremark account, which will allow you to:

- Locate a participating pharmacy;
- View the drug formulary & preventive drug list;
- Request mail order refills quickly and conveniently;
- View prescription history;
- Learn more about the drugs you take;
- Contact a pharmacist.

To create an account, click “Register Now” on the homepage of Caremark.com or the Caremark app.
**Healthy IU**
[healthy.iu.edu](http://healthy.iu.edu)

As an IU employee or spouse, Healthy IU is your wellness program. Healthy IU’s resources, programs, and workshops are free for faculty and staff employees and their spouses. These include resources, programming, and referrals related to:

- Tobacco cessation
- Nutrition and weight management
- Work+Life synergy
- Maternal health and lactation support
- Life safety
- Child and elder care
- and much more!

To encourage your to live your best life, Healthy IU offers free health screenings and a $100 (before tax) incentive to benefit eligible employees and spouses covered on an IU medical plan. The screening and incentive are available one time per fiscal year (July 1 – June 7).

For more information, and for a list of resources available on each campus, visit [healthy.iu.edu](http://healthy.iu.edu).

**Identity Protection** (for Anthem members)
[anthemcares.allclearid.com](http://anthemcares.allclearid.com)

Anthem medical plan members and their covered family members are automatically enrolled in the following identity protection service:

- **AllClear Identity Repair**: provides identity repair assistance to help fix identity theft issues and return your information to its proper condition.

For an extra layer of protection, you can sign up for the following additional service at no extra charge:

- **AllClear Credit & Identity Theft Monitoring Services**: credit monitoring, identity theft insurance (up to $1 million), ChildScan for minors, and more.

For more information, visit [anthemcares.allclearid.com](http://anthemcares.allclearid.com) or call 1-855-227-9830 Monday through Saturday from 8:00 AM – 8:00 PM Central Time.

**Nyhart IU** (for HSA & TSB participants)
[iu.nyhart.com](http://iu.nyhart.com)

Save time and hassles while making the most of your HSA and TSB healthcare accounts using Nyhart’s web portal and mobile app. Features include:

- View your balances 24/7
- File and view claims
- Call or email Nyhart Customer Service
- Make HSA transactions
- Order a new debit card

When you log in for the first time, you must use the following credentials:

**Website** (iu.nyhart.com)
Username: 10-digit employee ID
Password: Last 4 digits of SSN

**Mobile App** (Nyhart IU)
Username: 10-digit employee ID
Password: 10-digit employee ID + last 4 digits of SSN

Get started at [iu.nyhart.com](http://iu.nyhart.com) or by downloading the Nyhart IU app from the App Store or Google Play.

**529 College Savings Plans**

One of the **BEST WAYS** to Save for College!

Did you know that you can get tax breaks and other benefits by opening an account specifically designed to let you save for college? Also known as qualified tuition programs, 529 college savings plans are designed to help you save for future education expenses for anyone—your child, your grandchild, your niece, your nephew, or even yourself.

Is Indiana’s 529 Plan Right for You?

You can open a 529 savings plan in any state, however, most states offer incentives for their residents. For example, Indiana taxpayers who sign up for Indiana’s CollegeChoice 529 receive additional benefits including no annual account maintenance fees and a state income tax credit equal to 20% of your contributions, up to $1,000 maximum per year.

Bottom line—no matter what state’s plan you sign up for, a 529 savings plan is a smart choice. Visit [529.iu.edu](http://529.iu.edu) for more information and to learn how IU employees can save automatically through IU Payroll direct deposit.
**Sydney Health** (for Anthem members)
sydneyhealth.com

Getting your benefits information when and where you need it is now faster, simpler, and more personal with Sydney. With just one click you can:
- Find care and check costs
- See your claims
- Ask Sydney’s chat bot questions
- View and use your Anthem ID card

Sydney acts like a personal health guide, answering your questions and connecting you to the right resources at the right time. Sydney can provide you with alerts, reminders, and tips, suggest a doctor, and help you stay healthy and save money on medical costs.

Download the Sydney Health app from the App Store or Google Play to get started!

---

**Telemedicine Visits**
livehealthonline.com (Anthem members)
iuhealth.org/videovisits (IU Health Plan members)

IU-sponsored medical plan participants have 24/7 access to doctors from a smartphone, tablet, or computer with a webcam.

Online visits typically cost around $59 and most people are connected to a doctor in 10 minutes or less. They can assess your condition, provide treatment options, and even send a prescription to the pharmacy, if needed.

Get started at the websites listed above or download the mobile app for your plan.

---

**Teledental Visits**
MyCigna.com (IU Dental Plan members)

IU Dental Plan members have 24/7 virtual access to licensed dentists for urgent dental concerns such as infection, pain, swelling, and more. Depending on the situation, the dentist can also prescribe medications such as antibiotics and non-narcotic pain relievers, as appropriate.

Online visits typically cost around $45 and are available 24/7. To access services:

1. Log in to MyCigna.com (you must connect to the portal via your MyCigna account in order to use the service without having to enter a payment method)
2. Under “Latest Updates” at the bottom of the page, select the link to See details (there will be a blue heart/plus sign icon near to the link)
3. Click Get Started in the popup box
4. Click Sign up to get started or click Log in now if you already have a TeleDentists account
5. Follow the prompts to request a consultation.

---

**WW—Weight Watchers Reimagined**
iu.ww.com

Indiana University is proud to offer WW (Weight Watchers® Reimagined) at no cost to all benefit-eligible employees and spouses enrolled in an IU-sponsored medical plan.

WW delivers programming in two ways to fit your lifestyle:

1. **Digital Only (e-Tools):** an easy-to-use app and website to track your food, movement, and weight goals; barcode scanner, restaurant items, and over 5,000 recipes; and expert chat available 24/7.
2. **Digital + Workshops:** offers access to virtual workshops and workshops in the community with guidance from a trained WW Coach and motivation from members who are on the same path. Additionally, this option provides access to all the digital tools.

To get started, visit iu.ww.com. The employee and spouse will need the employee’s 10-digit university ID to enroll.

*IU covers 100% of cost of WW; however, per IRS rules, the value of the program is considered a taxable benefit.*
Employers, like IU, are required to provide notices to employees about rights and responsibilities they have related to healthcare coverage. For the full text of these notices visit hr.iu.edu/benefits/federal_notices.htm. A summary of each is provided below.

**ACA HEALTH INSURANCE MARKETPLACE**
This notice provides basic information about the ACA Health Insurance Marketplace that took effect January 1, 2014, and health coverage offered by IU which meets the affordability and minimum value standards defined by ACA.

**COBRA**
Employees and their covered dependents have the opportunity for a temporary extension of medical coverage at group rates in the event that coverage would otherwise end.

**HEALTHCARE COVERAGE FOR CHILDREN**
Children of employees who have not yet reached age 26 are eligible to enroll in IU-sponsored healthcare coverage. This includes children whose coverage ended or who were previously ineligible for coverage due to marriage or tax dependent status.

**MEDICARE PRESCRIPTION DRUG COVERAGE**
The University’s employee prescription benefit allows covered individuals to delay enrolling in Medicare prescription coverage without penalty as long as enrollment takes place within 63 days of IU coverage ending.

**NEWBORNS AND MOTHER’S HEALTH PROTECTION ACT**
Benefits for hospital length of stay in connection with childbirth, for the mother or newborn child, may not be restricted beyond minimum guidelines as described in this act. IU meets this requirement.

**NOTICE OF PRIVACY PRACTICES**
IU maintains the privacy of Protected Health Information (PHI) that is received or created by its healthcare plans. PHI is only used for the payment, treatment, or operations of its healthcare plans consistent with federal and state privacy laws.

**NOTICE OF SPECIAL ENROLLMENT RIGHTS**
IU employees may change health care coverage during the year when there are specified changes in their status and there is immediate notification to the employer. Guidelines for these changes and notification parameters are detailed in this Federal Notice.

**PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP)**
If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from IU, the State of Indiana may have a premium assistance program that can help pay for coverage.

**THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (USERRA)**
USERRA establishes employee eligibility and job entitlements, employer obligations, benefits, and remedies under the Act.

**WOMEN’S HEALTH AND CANCER RIGHTS ACT (WHCRA)**
The mastectomy and reconstruction benefits provided under IU medical plans meet all the requirements of WHCRA.
Virtual Information Sessions

Live Sessions
IU Human Resources is holding live webinar sessions for individuals interested in learning more about Open Enrollment and what’s changing for 2021. Each session will include an online presentation and an interactive Q&A segment. No RSVP is required for these sessions and family members are welcome to attend.

On the day of the presentation click the icon on the calendar below, or go to go.iu.edu/oe and click the link provided, to join the webinar.

OCTOBER 2020
All times listed are Eastern Time (ET)

<table>
<thead>
<tr>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>16</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td></td>
<td><img src="go.iu.edu/oe" alt="OE website live" /></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
<td>22</td>
<td>23</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>![Live Webinar](12 – 1 p.m.)</td>
<td>![Live Webinar](10 – 11 a.m.)</td>
<td>![Live Webinar](3 – 4 p.m.)</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>26</td>
<td>27</td>
<td>28</td>
<td>29</td>
<td>30</td>
<td>31</td>
</tr>
<tr>
<td>![Live Webinar](12 – 1 p.m.)</td>
<td>![Live Webinar](12 – 1 p.m.)</td>
<td>![Live Webinar](12 – 1 p.m.)</td>
<td>![Live Webinar](10 – 11 a.m.)</td>
<td>![Live Webinar](3 – 4 p.m.)</td>
<td>![Live Webinar](12 – 1 p.m.)</td>
<td></td>
</tr>
</tbody>
</table>

NOVEMBER 2020

<table>
<thead>
<tr>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>![Live Webinar](3 – 4 p.m.)</td>
<td>![Live Webinar](9 – 10 a.m.)</td>
<td>![Live Webinar](3 – 4 p.m.)</td>
<td>![Live Webinar](9 – 10 a.m.)</td>
<td>![Live Webinar](3 – 4 p.m.)</td>
<td>![Live Webinar](9 – 10 a.m.)</td>
<td></td>
</tr>
</tbody>
</table>

On-Demand Sessions
Unable to attend a live session? Visit go.iu.edu/oe for an on-demand recording of the virtual Open Enrollment session. Additional on-demand videos will also be available to provide overviews of the IU-sponsored health plans and spending and savings accounts.