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ENROLLING IN BENEFITS

Which benefits am I eligible for?
Eligibility for benefits varies from person to person. An overview of benefit eligibility can be found on the Benefits Eligibility & Enrollment page. This page is categorized based on job type, however, if you are unsure of your current status at the University you may find out using the Benefits Eligibility Key within HRMS. Directions on how to find the Benefits Eligibility Key are located at the bottom of the Benefits Eligibility & Enrollment page.

How much time do I have to enroll in my benefits?
When you are hired or become newly benefit eligible there are varying deadlines for enrolling in each benefit*:

30 Days:
- Health Care Plans
- Dental Plans
- Flexible Spending Account
- YOUR Benefits Extras (VSP Vision Care & Hyatt Legal Plans)

31 Days:
- Long-Term Disability Plan

90 Days:
**Optional Life Insurance

Eligible individuals may enroll in all other benefits offered by the University of Rochester at any time. A detailed timeline can be found on the Benefits Eligibility & Enrollment page.

*Eligibility varies for the benefits listed above. Please check your eligibility.
**After the initial 90-day period you may still enroll, however, proof of good health may be required

Where do I enroll in benefits?
Platforms for enrolling in benefits vary depending on the benefit you are looking to enroll in:

HRMS – Newly hired faculty and staff may log in to HRMS to enroll in Health Care Plans*, Dental Plans*, Health Savings Account (HSA), Flexible Spending Account (FSA), Long-Term Disability Plan, Optional Life Insurance, University-Paid Basic Term Life Insurance**
www.YOURBenefitsExtras.com - VSP Vision Care, Hyatt Legal Plans, Group Auto & Home Insurance

Tiaa.org/Rochester - Retirement Program

Total Rewards Enrollment Page – Certain wellness events/programs, overview sessions, etc.

URWell.rochester.edu/Programs – Well-U programs including biometric screenings, lifestyle management programs, condition management programs, Behavioral Health Partners and Life-Work Connections/EAP

Paper Application – Tuition Benefits

Phone Call – Home Ownership Program and Voluntary Long-Term Care Insurance

*Postdoctoral Associates & Fellows enroll in medical, dental and vision benefits through the Garnett Powers website.
** Eligible employees are automatically enrolled and only need to log in to HRMS to select beneficiaries
CHANGING YOUR BENEFIT ELECTIONS

When can I change my benefit elections?
Once your initial eligibility period is over you may enroll in or change your benefit elections for the following benefits during the yearly, 2-week Open Enrollment timeframe (early November):

- Health Care Plan
- Dental Plan
- Flexible Spending Account (FSA)
- Health Savings Account (HSA)
- Optional Life Insurance
- VSP Vision Care
- Hyatt Legal Plans

Changes may also be made to certain benefit plans outside of Open Enrollment due to a qualifying event (such as marriage, the birth of a child, etc.). Most other benefit elections can be changed anytime throughout the year. View the Changing My Benefits page for detailed information.

What is Open Enrollment?
Open Enrollment is a 2-week time frame where you may make changes to your benefit elections for the coming year for health care, dental, Flexible Spending Accounts, Health Savings Account, VSP Vision Care, and Hyatt Legal Plans. You may also enroll in or increase coverage for Optional Life Insurance during this timeframe without providing proof of good health.

Most other benefits may be enrolled in or changed anytime throughout the year.

When is Open Enrollment?
Open Enrollment to make changes to your benefit elections is held during the Fall.

What is a qualifying event?
A qualifying event allows you to change your elections for certain benefits outside of the annual Open Enrollment period. A few common qualifying events include family status changes (such as marriage, divorce, birth, etc.), death, retirement, approved leave (such as FMLA), loss of coverage, etc.

An abbreviated list of qualifying events can be found within the Qualifying Event Change Form and the full list can be found within the Qualifying Event Matrix. If you wish to change your health or dental care benefit elections due to a qualifying event, the Qualifying Event Change form must be received within 30 days of the event in most cases. For more information about changing your Optional Life Insurance or VSP Vision Care benefit elections, view the Changing My Benefits page.
Which benefits can I enroll in and change anytime throughout the year?
Eligible individuals may enroll/participate in or make changes to the 403(b) Retirement Program, Well-U programs, tuition benefits, the University Home Ownership Incentive Program, Group Auto & Home Insurance and Voluntary Long-Term Care Insurance anytime throughout the year. You may also enroll in or make changes to Group Universal Life (GUL) and Group Optional Term Life (GOTL) Insurance, however, proof of good health may be required outside of the open enrollment period.
HEALTH CARE QUESTIONS

HEALTH CARE FLEXIBLE SPENDING ACCOUNT (FSA)

What is a Health Care FSA?
A Health Care Flexible Spending Account (FSA) is a tax-advantage reimbursement account that allows you to set aside money for eligible expenses on a pre-tax basis. This account reimburses you for qualified out-of-pocket medical, dental, prescription, or vision services including expenses applied towards your deductible, copays and coinsurance.

Who is eligible for a Health Care FSA?
Full-time and part-time faculty and staff, including members of 1199 SEIU, who are enrolled in the YOUR PPO Plan or YOUR HSA-Eligible Plan, or who have waived University Health Care coverage are eligible to contribute to a Health Care FSA.

How much can I contribute per year? Does my money roll over to the next year?
The Health Care FSA maximum election amount for the 2019 Plan Year is $2,650. You may not change your annual contribution amount unless you experience a qualifying event.

IRS regulators have issued guidance modifying the traditional "use it or lose it" rule for health care flexible spending accounts (FSA) to allow employers the option to let participants carry over up to $500 of their unused balances from one Plan Year to the next. Faculty and staff members with a 2019 Health Care FSA will be able to carry over up to $500 of unreimbursed Health Care FSA dollars to the 2020 Plan Year.

Employees will have until April 30, 2019 to submit reimbursement claims for health, dental or vision expenses incurred during the 2018 Plan Year. Any unreimbursed 2018 funds exceeding $500 will be forfeited.

How do I contribute to the account?
Your annual Health Care FSA contribution amount will be split evenly between the numbers of pay periods you have each calendar year. Each pay period, your contribution will be automatically deducted from your paycheck - before taxes- and deposited into your FSA.

You will have immediate access to your full annual FSA election even if you have not yet placed all of the funds in your Health Care FSA.
What can I use the account for?
You can be reimbursed from your Health Care FSA for qualified medical expenses including out-of-pocket costs counting towards your deductible, coinsurance, and copays. The qualified medical expenses must be incurred on or after the effective date of your Health Care FSA.

For a complete list of eligible health care expenses, consult IRS Publication 502. Please note that you generally cannot use the Health Care FSA to pay insurance premiums or for long-term care expenses, even though they appear in IRS Publication 502.

How do I access these funds?
You can set up your reimbursements to be directly deposited into your personal banking account; otherwise, you will be reimbursed with a check from your Health Care FSA administrator. Expenses processed as part of your University Health or Dental coverage will be automatically reimbursed through your Health Care FSA unless otherwise requested. If you or your eligible dependents incur qualified expenses not covered by the University Health or Dental Plans, or if you did not elect coverage through the University, you must submit a manual request for reimbursement for your Health Care FSA administrator.

Who is my Health Care FSA Administrator?
Pay Flex administers Health Care FSAs for Aetna members. Lifetime Benefit Solutions administers Health Care FSAs for Excellus members.

LIMITED PURPOSE FLEXIBLE SPENDING ACCOUNT (FSA)

What is a Limited Purpose FSA?
A Limited Purpose Flexible Spending Account (FSA) is a tax-advantage reimbursement account that allows you to set aside money for eligible expenses on a pre-tax basis. This account can provide reimbursement for qualified dental or vision expenses but cannot reimburse any out-of-pocket health care expenses until the plan deductible has been satisfied; otherwise, the Limited Purpose FSA works like a Health Care FSA.

Who is eligible for a Limited Purpose FSA?
Employees enrolled in the YOUR HSA-Eligible Plan and are contributing to a Health Savings Account (HSA), are also able to contribute to a Limited Purpose FSA.

How much can I contribute per year? Does my money roll over to the next year?
The Limited Purpose FSA maximum election amount for the 2019 Plan Year is $2,650. You may not change your annual contribution amount unless you experience a qualifying event.
IRS regulators have issued guidance modifying the traditional "use it or lose it" rule for Limited Purpose flexible spending accounts (FSA) to allow employers the option to let participants carry over up to $500 of their unused balances from one Plan Year to the next. Faculty and staff members with a 2019 Limited Purpose FSA will be able to carry over up to $500 of unreimbursed Limited Purpose FSA dollars to the 2020 Plan Year.

Employees will have until April 30, 2019 to submit reimbursement claims for health, dental or vision expenses incurred during the 2018 Plan Year. Any unreimbursed 2018 funds exceeding $500 will be forfeited.

**How do I contribute to the account?**
Your annual Limited Purpose FSA contribution amount will be split evenly between the number of pay periods you have each calendar year. Each pay period, your contribution will be automatically deducted from your paycheck - before taxes - and deposited into your Limited Purpose FSA.

You will have immediate access to your full annual Limited Purpose FSA election even if you have not yet placed all of the funds in your Limited Purpose FSA.

**What can I use the account for?**
You can be reimbursed from your Limited Purpose FSA for qualified dental or vision expenses. You may not be reimbursed for qualified medical expenses until your plan deductible has been met. The qualified expenses must be incurred on or after the effective date of your FSA.

For a complete list of eligible health care expenses, consult IRS Publication 502.

**How do I access these funds?**
You must submit a manual request for reimbursement for your FSA administrator.

**Who is my FSA Administrator?**
Pay Flex administers Limited Purpose FSAs for Aetna members. Lifetime Benefit Solutions administers Limited Purpose FSAs for Excellus members.
DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT (FSA)

What is a Dependent Care FSA?
A Dependent Care FSA is a tax-advantaged savings account designed to help you save money on daycare expenses for qualified dependents.

What are qualified dependents?
Qualified dependents include children under age 13, whom you claim as a tax dependent on your federal income tax return (special rules apply for divorced parents) or a disabled spouse or any other dependent on your tax return who resides with you and is physically or mentally disabled.

How much can I contribute per year? Does my money roll over to the next year?
The maximum contribution amount set by the IRS for 2019 is $5,000. You may not change your annual contribution amount unless you experience a qualifying event.

How do I contribute to the account?
Your annual Dependent Care FSA contribution amount will be split evenly between the number of pay periods you have each calendar year. Each pay period, your contribution will be automatically deducted from your paycheck - before taxes- and deposited into your Dependent Care FSA.

What can I use the account for?
Qualified expenses eligible for reimbursements from your Dependent Care FSA include Child Care Centers, Nursery School, and before and after school care. The qualified expenses must be incurred on or after the effective date of your Dependent Care FSA. See IRS Publication 503 for a complete list of eligible expenses.

How do I access these funds?
You only have access to the funds currently in your account, not the full annual election.

You must submit a manual request for reimbursement for your Dependent Care FSA administrator.

Can I roll money over to the next year?
No. Funds in a Dependent Care FSA cannot be rolled over into the next Plan Year.

Who is my Limited Purpose FSA Administrator?
PayFlex administers Dependent Care FSAs for Aetna members. Lifetime Benefit Solutions administers Dependent Care FSAs for Excellus members.
HEALTH SAVINGS ACCOUNT (HSA)

Who is eligible for a Health Savings Account?
A Health Savings Account (HSA) is available to eligible individuals who meet all of the following criteria:

- Employee has elected coverage under the University’s YOUR HSA-Eligible Plan for 2018.
- Employee is not covered by any other health plan, including spousal health insurance, except for that the IRS permits.
- Employee cannot be enrolled in any part of Medicare, Tricare, Medicaid or state health care programs.
- Employee cannot elect or be covered by another person’s Health Care Flexible Spending Account or Health Reimbursements Arrangement for 2018.
- Employee will not be claimed as a dependent on another person’s tax return for 2018.
- Employee has not received Veteran’s Administration health benefits in the past 90 days. Only preventative, dental and vision is permitted.

How much can I contribute per year? Does my money roll over to the next year?
The HSA maximum election amount for the 2019 Plan Year for employees with single coverage can contribute up to $3,500. Employees covering one or more dependents on their plan may contribute up to $7,000. Employees who are 55 or older may contribute an additional $1,000 per year to a HSA through pre-tax deductions as a "catch-up" contribution. Changes to an HSA annual contribution amount can be made at any time in the year.

How do I contribute to the account?
You can make pre-tax payroll contributions each pay period by electing an annual contribution amount. This amount can be changed at any time throughout the year.

Employees may also make after-tax direct contributions to their HSA and claim the contribution on their annual tax return. These contributions still have to comply with the IRS’ maximum election of $3,500 for single plans or $7,000 for family plans for the tax year.

If you have an HSA elsewhere, you can transfer those funds to your new HSA through the University. Contact your HSA administrator for details.

If you start your employment at the University after the first month of the tax year, you may contribute the maximum election throughout the remainder of the year if: (a) you are in the University’s YOUR HSA-Eligible Plan as of December 1st and (b) you remain in a qualifying High Deductible Health Plan for the entire 2019 year. Contact your HSA administrator for details.
Will the University contribute money to my account?
In 2019, the University will provide a one-time HSA contribution of $200 individual/$400 family for full-time employees earning less than $52,000 and Residents and Fellows who enroll in the YOUR HSA-Eligible Plan during the Open Enrollment and satisfy the IRS eligibility requirements. We will also provide a prorated contribution to full-time employees earning less than $50,000 and Residents and Fellows if they are: new hires, rehires, newly eligible employees as well as employees or Residents and Fellows experiencing a qualifying event.

What can I use the account for?
You can use your HSA to pay for qualified medical expenses including out-of-pocket costs counting towards your deductible, coinsurance, copays and out-of-pocket maximum.

The qualified medical expenses must be incurred on or after the effective date of your HSA and can be for you, your spouse, and your tax dependents, even if you have single coverage under the YOUR HSA-Eligible Plan.

For a complete list of eligible health care expenses, consult IRS Publication 502. Please note that you generally cannot use the HSA to pay insurance premiums even though they appear in Publication 502. Exceptions would be for COBRA, long-term care, insurance while you are unemployed, retiree health insurance, or Medicare Part A, B, C, or D premiums.

How do I access these funds?
You only have access to the funds currently in your account, not the full annual election.

There are three ways you can use your HSA funds:
1. Swipe your card at the point of service to pay for qualified medical expenses. You will receive this card in the mail from your HSA administrator once you pass the Customer Identification Program (CIP).
2. Use online bill payment to pay your provider directly from your HSA.
3. Pay for a qualified medical expense out-of-pocket, then reimburse yourself from your HSA.

Can I roll money over to the next year?
Unused funds in an HSA continue to roll over in the account each year and collect tax-free interest. An HSA is portable, so employees can keep their HSA when they retire, leave the University, or change health care plans.

I am turning 65 soon and am currently contributing to a Health Savings Account. Should I enroll in Medicare?
If you would like to continue to contribute to your HSA, you should not enroll in any part of Medicare. If you are enrolled in any parts of Medicare, you cannot contribute pre-tax dollars to
your HSA. Additionally, if you are collecting Social Security Benefits, you will be automatically enrolled in Medicare Parts A and B. Since you are covered on a large employer group plan, you can contact Social Security to waive Medicare Part B but will not be able to waive Medicare Part A. Therefore, you will not be able to contribute to your HSA.

If you do enroll in Medicare Part A, your coverage start date may go back (retroactively) six months from when you sign up, and as a result you may need to stop contributing to your HSA up to six months in advance of enrolling. For more information, contact Social Security.

I am an active employee at the University of Rochester who is covering my spouse on my health plan, and my spouse is turning 65. Do I, the employee, have to stop contributing to my HSA?

As the employee, you may continue to contribute to your HSA as long as you are not enrolled in any parts of Medicare. You can continue to use your HSA to pay for any eligible expenses your spouse incurs.

Who is my HSA Administrator?
PayFlex is the administrator for Aetna members. HSA Bank is the administrator for Excellus members.

HEALTH CARE PLANS

What are the Tiers? Do I need to choose a Tier for my Health Care Plan?
The University Health Care Plans offer three tiers of providers with different levels of coverage. You do not choose a tier when electing a Health Care Plan. The tier is determined based on the network in which your provider/facility participates. Your deductible and out-of-pocket maximums cross apply between all tiers. The insurance card you receive in the mail with your member ID is the ID you will give your provider regardless of the tier they are in.

- **Tier 1 - Accountable Health Partners (AHP) Providers:** AHP is a panel of University of Rochester Medical Faculty Group providers and carefully selected community partners. You will have a lower deductible, copay, coinsurance, and out-of-pocket maximum than tier 2 and tier 3 providers. Please note, all AHP providers are also in the Aetna and Excellus national networks.
- **Tier 2 – Third-Party Administrator (TPA) Network:** When you chose your TPA (Excellus BlueCross BlueShield or Aetna), you may seek providers within that TPA’s national network. Services provided at the tier 2 benefit level will be subject to higher deductibles, coinsurance, copays and out-of-pocket maximums than tier 1 providers, but lower than tier 3 providers.
- **Tier 3 – Out-Of-Network:** This includes any providers who do not participate in AHP and your TPA network. Services provided at the tier 3 benefit level will be subject to higher deductibles, coinsurance, and out-of-pocket maximums than tier 1 and 2 providers and will be capped at the reasonable and customary levels; you may be subject to balance billing.
What is a premium?
A premium is the cost of your Health Care Plan that is automatically deducted from your paycheck – before taxes.

What is a deductible?
A deductible is the amount of out-of-pocket expenses that you must pay for health services before the plan begins to pay benefits for many covered services.

What is coinsurance?
Coinsurance is the percentage of the fee that your health care plan pays for certain covered expenses once you have met your annual deductible.

What is an out-of-pocket maximum?
This is the maximum amount you would need to pay each plan year to receive covered services after you meet your annual deductible. This amount includes your deductible, copays and coinsurance payments. If you reach the out-of-pocket maximum, the plan pays 100% of covered health care and prescription drug expenses for the remainder of the plan year.

How can I find out if my doctor is in AHP? Where can I find a list of AHP providers accepting new patients?
Use the AHP Provider Search at ahpnetwork.com/search-provider/ to determine whether your providers are in AHP. To view a list of providers accepting new patients, click on the “View Primary Care Physicians Accepting New Patients” button in the upper right-hand corner of the AHP Provider Search page.

How much do the plans cost?
View the Rate Sheets at rochester.edu/benefits/rates to determine what the premium is for each plan. Premiums are automatically deducted from your paychecks via pre-tax payroll deductions.

Who can I cover on my plan?
The coverage levels available to you for health care are:
1. Single
2. Employee and Child(ren)
3. Employee and Spouse or Domestic Partner
4. Family

For a list of benefit eligible dependents, view the Definition of Benefit Eligible Dependents.
Are there additional steps I need to take to cover my Domestic Partner?

Yes. You will need to complete the Certification of Domestic Partner Status Form, found at rochester.edu/benefits/forms, certifying that you and your Domestic Partner meet the criteria as domestic partners for the purpose of being eligible for certain benefits offered under the University of Rochester’s benefits program. You may also submit the tax affidavit, if applicable.

What life events are considered “Qualifying Events”?

Below are qualifying events:

- Legal Marriage/Domestic Partnership
- Legal Separation or Divorce
- Termination of Domestic Partnership
- Birth of a Child/Adoption of a Child
- Gain Eligibility of Medicaid/Medicare
- Loss Eligibility of Medicaid/Medicare
- Approved Leave (i.e. FMLA, Military Leave, Layoff)
- Return from Leave (i.e. FMLA, Military Leave, Layoff)
- Retirement
- Loss of Coverage
- Spouse/Domestic Partner or Parent/Dependent Child Open Enrollment Period
- Dependents Gains Eligibility Through Their Own Employer or Parent’s Coverage
- Change in Cost of Care for Dependent Care FSA
- Significant Increase in the Employee’s Share of Health Care Premiums
- Significant Decrease in the Employee’s Share of Health Care Premiums
I am traveling outside of the United States. Am I still covered?
View the Aetna when Traveling or Excellus when Traveling documents for more information. Also view the Travel-Accident Insurance Policy and the Travel Assistance Service Identification Card. These documents can be found at rochester.edu/benefits/health.

I am an active employee enrolled in health insurance through the University of Rochester and am not collecting Social Security Benefits. Do I need to enroll in Medicare when I turn 65?
If you are actively working and are becoming Medicare-Eligible, you will not need to enroll in Medicare. Your Health Plan through the University of Rochester will continue to be the primary payer since your insurance is through a large employer group health plan. If you enroll in any parts of Medicare, Medicare will be the secondary payer.

If you have a HSA and you would like to continue to contribute to your HSA, you should not enroll in any part of Medicare. If you are enrolled in any parts of Medicare, you cannot contribute pre-tax dollars to your HSA.

To learn more about Medicare, please visit www.medicare.gov.

I am an active employee at the University of Rochester who is covering my spouse on my health plan, and my spouse is turning 65. Does my spouse need to enroll in Medicare?
If you are actively working and your spouse is becoming Medicare-Eligible, he/she does not need to enroll in Medicare. Your health insurance through the University of Rochester will continue to be the primary payer for both you and your spouse since your insurance is through a large employer group health plan. If your spouse enrolls in any parts of Medicare, Medicare will be the secondary payer for your spouse.

My dependent child is over 26, but still needs benefits, can I still cover them under my plan?
Special Extended Health Coverage is available for adult children, who are not otherwise eligible for coverage under his or her parent’s University Health Care Plan due to age, student status, or federal income tax dependent may be eligible to elect continuation coverage through age 29 under the University Health Care Plan. For more details, please see our Health Care Plans page for specific details regarding Special Extended Health Coverage for Certain Adult Children through Age 29.

When does my coverage end when I leave the University? Can I continue Coverage?
Coverage will be cancelled effective on the last day of the pay period in which you terminate. When coverage stops, you will be sent a separate document that explains your rights under COBRA continuation coverage.
DENTAL QUESTIONS

Do I need to choose a Third Party Administer (TPA) for my dental plan?
No, both University Dental Plans are administered by Excellus BlueCross BlueShield.

How much do the plans cost?
View the rate sheets at rochester.edu/benefits/rates to determine what the premium is for each plan. Premiums are automatically deducted from your paychecks via pre-tax payroll deductions.

What is the difference between the Traditional Plan and Medallion Plan?
The two dental plans differ in the following areas:

• Maximum Benefit Per Calendar Year per participant for classes II, IIA and III
• Major Restorative Services (Class III) coverage
• Orthodontia (Class IV) coverage

For details on these differences, view the Dental Plans Comparison Chart at rochester.edu/benefits/dental.

Which plan covers Orthodontia?
The Medallion Plan offers Orthodontia coverage for dependents up to age 19, covered at 50% up to the lifetime maximum of $1,500 per person for orthodontia. No more than one half of the orthodontia lifetime maximum will be paid in any calendar year.

Who can I cover on my plan?
The coverage levels available to you for dental are:

1. Single
2. Family

For a list of benefit eligible dependents, view the Definition of Benefit Eligible Dependents.

Do both plans cover preventative services (Class I) at the same level?
Yes, both plans pay 100% of the in-network negotiated rates. Preventative Services are not subject to a deductible. Out-of-network claims are subject to balance billing. See the Health Program Guide for details.

Are all dentists covered under these plans?
The dental plans allow you the freedom to see any dentist you choose. Dental Blue Options (in-network) gives you access to a range of participating dental providers to choose from, who have agreed to a discounted set of fees for covered services and accept these amounts as payment in full. To find a dentist in this network, use the Excellus BCBS “Find a Dentist” tool and
choose “Dental Blue Options” for Step 1. If your dentist does not fall within the Dental Blue Options network, you may be required to pay at time of service. Then, you can submit a claim to Excellus BCBS for reimbursement for the out of pocket costs you paid at the time of service.
WELL-U QUESTIONS

PERSONAL HEALTH ASSESSMENT (PHA) & BIOMETRIC SCREENING

Am I eligible to receive a biometric screening?
Before signing up for your biometric screening, please check the Wellness Program eligibility chart at rochester.edu/well-u/eligibility to make sure that you are eligible.

How do I sign up for a biometric screening?
You can sign up for your biometric screening using the online E-Health scheduler at schedule.son.rochester.edu. There will be a list of upcoming times and locations available to get a biometric screening.

How long will my biometric screening take?
Your biometric screening will take approximately 15 minutes, but could be longer or shorter depending on how much information you would like to discuss with the nurse.

Should I take my PHA before or after my biometric screening?
You can choose whether you prefer to take the PHA before or after your screening, however, we do suggest that you take it before your screening so that the nurse giving you your screening can make appropriate suggestions based both on your PHA and Biometric Screening results.

Where do I take my PHA?
You can log in to an existing account or create a new account on the UR Medicine Employee Wellness portal at urwell.rochester.edu/Login.

After completing my biometric screening and PHA, when will I receive my $125 incentive?
Eligible individuals receive their incentive in 1-2 pay periods after completing both their biometric screening and their online Personal Health Assessment. You will find your incentive under the “Hours & Earnings” section of your paycheck. It will be labeled “PHA Self” for the employee’s incentive, and “PHA SPDP” if you are receiving an incentive for a spouse/domestic partner.
LIFESTYLE MANAGEMENT PROGRAMS

Am I eligible to participate in a lifestyle management program?
Please check the Wellness Program eligibility chart at rochester.edu/well-u/eligibility to see which programs you are eligible for.

How much do lifestyle management programs cost?
Lifestyle management programs are no-cost for eligible individuals.

When will I receive my $100 incentive for completing a lifestyle management program?
Eligible individuals receive their incentive in 1-2 pay periods after completing a lifestyle management program. You will find your incentive under the “Hours & Earnings” section of your paycheck. It will be labeled “Well Pg Self” for the employee’s incentive, and “Well Pg SpDp” if you are receiving an incentive for a spouse or domestic partner.

How many lifestyle management programs can I participate in each year?
Eligible individuals may participate in as many lifestyle management programs as they would like, however, you will only receive the $100 incentive once per calendar year.

CONDITION MANAGEMENT PROGRAMS

Am I eligible to participate in a condition management program?
Please check the Wellness Program eligibility chart at rochester.edu/well-u/eligibility to see which programs you are eligible for. Eligible employees must also be diagnosed with the condition in order to participate in the program.

How much do condition management programs cost?
Condition management programs are no-cost for eligible individuals.

When will I receive my $100 incentive for completing a condition management program?
Eligible individuals receive their incentive in 1-2 pay periods after completing a condition management program. You will find your incentive under the “Hours & Earnings” section of your paycheck. It will be labeled “HLTH PG Self” for the employee’s incentive, and “HLTH PG SpDp” if you are receiving an incentive for a spouse/domestic partner.

How many condition management programs can I participate in each year?
Eligible individuals may participate in as many condition management programs as they would like, however, you will only receive the $100 incentive once per calendar year.
LIFE-WORK CONNECTIONS/EAP

What is Life-Work Connections/EAP?
EAP offers professional guidance to you and your immediate family members when personal or work-related problems become difficult to manage alone. EAP provides free assessment, short-term counseling and referral information. All University employees and their immediate family members are eligible for 5 free visits per calendar year per person.

What if I need more than 5 visits?
If you or another member of your household require more than 5 visits, your EAP counselor will refer you to a counselor in the community that is best suited to address your needs. Once referred, you will be responsible for payment. However, EAP takes into consideration what type of insurance you have and your ability to pay the co-pay.

Will my employer find out that I went?
Confidentiality is truly the hallmark of EAP’s services. All services are confidential, unless you give written permission or when mandated by law. Your EAP counselor will discuss the issue of confidentiality fully with you either prior to or at your first appointment.

Is Life-Work Connections/EAP available after business hours?
There may be times when you need to speak with a counselor immediately. If it is after normal business hours (8:00 a.m.-5:00 p.m.) and you have an urgent need, they can be reached by calling 585-475-0432. Their answering service will contact the EAP clinician on call who will return your call and provide immediate assistance.

BEHAVIORAL HEALTH PARTNERS (BHP)

What is Behavioral Health Partners (BHP)?
BHP offers confidential, one-on-one, in-person or telephonic counseling sessions to help University employees deal with stress, anxiety, and depression. BHP was developed in response to employee feedback about the need for accessible, affordable, and high-quality mental health care.

Am I eligible for BHP services?
Please check the Wellness Program eligibility chart at rochester.edu/well-u/eligibility to see if you are eligible.
What is the cost of BHP’s services?
You must be enrolled in a University Health Care Plan in order to see a BHP counselor.

- YOUR PPO Plan: Services received through BHP have no out-of-pocket cost (it is not subject to the $20 copay per visit)
- YOUR HSA-Eligible Plan: Services received through BHP are subject to the annual deductible and are covered at 100% after the deductible is met.

Do I need a referral to be seen at BHP?
No.

TELEHEALTH

What is telehealth?
Telehealth is a secure, web-based video conferencing tool, accessible via your smartphone, tablet, or any computer with a webcam. It is used to facilitate long-distance health care and health-related education.

What equipment do I need for telehealth?
You will need a smartphone, tablet, or any computer with a webcam. We recommend a secure internet connection, as telehealth will use large amounts of data.

How do I access Zoom?
Open the app store from your mobile device and download the Zoom Cloud Meetings app. You will receive a Zoom session meeting number/link for your program. Either enter the number into the Zoom app or click the link from the confirmation email you receive to enter the Zoom session at the time of your appointment.

Which wellness programs are available via telehealth?
Eligible individuals have access to the following Well-U programs via telehealth:

- Behavioral Health Partners
- Condition Management
- Lifestyle Management (available for a limited number of programs)
- Life-Work Connections/EAP

How is a telehealth appointment different from an in-person appointment?
It’s not! You will receive the same program via telehealth as you would in-person. The only difference with telehealth is that you may choose to participate from the location of your choice.

**WW**

**What is Weight Watchers®/WW?**
WW is Weight Watchers reimagined.

Our purpose is to inspire healthy habits for real life. For people, families, communities, the world, for everyone. We will always have the best weight-loss program on the planet, and now we’re putting our decades of experience in behavior change to work for an even greater mission. We are becoming the world’s partner in wellness. No matter what your goal is — to lose weight, eat healthier, move more, develop a more positive mindset, or all of the above — we will bring you science-based solutions that fit into your life.

As a reflection of our new mission, we are moving from Weight Watchers to WW — a mark that’s rooted in the familiar but reimagined to welcome everyone who seeks to be healthier, not just manage their weight.

**Why is the University of Rochester partnering with WW?**
University of Rochester has teamed up with WW to bring you a program that gives you real-life solutions to get healthier, all at a special price.

**If I register for WW, will my membership and weight information be kept confidential?**
Yes, it will. Although University of Rochester will receive information about the total membership's weight loss, it will not receive any individual or personally identifiable information.

**What are the WW offerings through the University of Rochester?**
Two WW offerings are available to you. You can choose the plan that fits your lifestyle.

**Offering 1:** Digital (previously referred to as OnlinePlus)
**Offering 2:** Digital + Workshops (previously referred to as Meetings + OnlinePlus)

**Who can take advantage of the WW offerings through the University of Rochester?**
All full- and part-time University of Rochester employees are eligible to participate. Workshops (which used to be called meetings) are not available in some areas in the U.S. To find out if the county you reside in is a non-participating area, please visit [http://wwfranchisecountylist.com](http://wwfranchisecountylist.com).

To become a WW member, you must:
• Be at least 18 years old.
• Not be pregnant.
• Not have an active medical diagnosis of bulimia nervosa or anorexia nervosa.

**What is the cost of WW through the University of Rochester?**

- **Offering 1**: Digital (previously referred to as OnlinePlus): $8.48 per month
- **Offering 2**: Digital + Workshops (previously referred to as Meetings + OnlinePlus): $19.11 per month

*State taxes will be added where applicable. You will be charged the listed prices each month until you cancel your membership or if you are no longer eligible for the company discount.*

**How do I register for the WW offerings though the University?**

You can purchase either of these offerings at [https://wellness.weightwatchers.com](https://wellness.weightwatchers.com) with **Employer ID: 46928** to receive a special price. For assistance, call 866-204-2885 (Monday-Friday 8:00 a.m.-10:00 p.m. ET; Saturday 11:00 a.m.-5:00 p.m. ET). If you have any questions you may also email wellnesshelp@weightwatchers.com.

If you are a current WW member, you can still take advantage of the discounted pricing and reimbursement. Please call WW at 1-866-237-6032 (Monday-Friday 8:00 a.m.-10:00 p.m. ET; Saturday 11:00 a.m.-5:00 p.m. ET) for assistance with getting your membership switched to the University of Rochester special pricing.

**How do I cancel my WW subscription?**

The cancellation process is hassle-free. You can easily cancel your Digital or Digital + Workshops (previously known as Meetings + OnlinePlus) membership on the WW website. Simply log in to your account, go to “Settings,” and then go to “Account” to view your cancellation options. If you would like assistance with cancelling your account, you can call 866-204-2885.

If you have already been billed for your next month, call 866-204-2885 to receive a full refund for the upcoming month. Please note that you will not receive a refund for the month in which you cancel, except as provided in the Cancellation Policy.

**BECOME A RUNNER PROGRAM**

**How far is each run?**

The Become a Runner program starts out with a mix of walking and running and very slowly progresses to all running. By the end of the program you will run 3.1 miles (5K). At the beginning, expect to walk 1 minute, run 1 minute (or as much as you can) for 20 minutes total.
How do I register for the program?
Register through the YMCA website- rochesterymca.org/become-a-runner/
You will find additional enrollment information on the Well-U, Become a Runner webpage (rochester.edu/well-u/runner)

When will I get reimbursed?
You will be reimbursed 100% of the program fee after the program is complete. You must attend 7 of the 9 in-person training sessions to receive the refund. The YMCA registration page will ask for your employee ID number; enter your employee ID number correctly and you will receive your refund loaded into your paycheck within 2 months after program completion.

If I start the program and decide I don’t want to do it, can I get a refund?
No. Well-U and the YMCA provide informational sessions prior to registration opening. This is your chance to meet the coach, look over the training plan, and ask any and all questions you have before committing to the program. Refunds for participants dropping from the program will not be issued.

Will class be held outside if it rains?
Yes! Running in the rain is fun! Unless weather conditions are extreme, you will be running outside. Dress accordingly.

Will there be free parking available?
Parking costs are based on the program location for each session. Listed below are the parking options for each location:

Saunders Research Building: Parking is available in the visitor lot at Saunders Research Building for a fee. Well-U will not cover the cost of parking. If you’re coming from off-site, there is free parking in the College Town garage. This is about a 10-minute walk to Saunders Research Building.

College Town: Yes, free parking is available for up to 4 hours

YMCA: Yes, free parking is available

Can I register my spouse/friend/child, etc.?
Yes, but they will not be reimbursed for the program fee.
WELL-U CHAMPIONS

What is a Well-U Champion?
Well-U Champions are liaisons between the University Wellness Department and their own department. Champions are responsible for promoting wellness programs and events to their coworkers and communicating the needs and wants of their department back to Well-U.

Do I have to re-sign up to be a Champion every year?
Yes. At the beginning of each year we require Champions to reenroll in order to affirm their commitment to being a Champion and allow new people to sign up if the previous Champion is no longer interested in being a Champion.

What do I get for being a Champion?
Well-U Champions are considered the go-to person about health and wellness in their department, and the title of being a “Well-U Champion” carries weight around the University. Along with the title, Well-U also holds quarterly events, exclusively for our Champions, to thank you all for your dedication to health and wellness in our UR community.

FITNESS CLASSES

Who can enroll in the free, Well-U sponsored fitness classes?
Employees are the only people eligible to enroll.

How long do the classes last?
The majority of classes are held once a week for 8-week sessions, and you must sign up again after the 8-week session is over if you would like to continue attending. Session begin and end dates are listed on the Well-U fitness class page.

Certain classes are held on a monthly basis. Participants enrolled in classes that are held monthly must still re-sign up at the end of every session.

I went to sign up and the class was full, so I signed up for the waitlist. How long will it be until I find out if I get into the class?
This depends. We allow people from the waitlist to join the class when a person in the class either drops out or fails to attend at least 75% of the classes. If someone is no longer able to attend, we immediately notify the next person on the waitlist. As a waitlist member, you may be notified to join the class early on, or you may never get into the class. We encourage all
employees to pay attention to the registration opening date and enroll as early as you can. Sign up for the Weekly Wellness newsletter to receive information about fitness class registration dates.

**Can I enroll in multiple classes?**
As per the Enrollment Policy, employees may only enroll in 1 class per session. However, if a class still has open spaces in it after the first class, you may sign up for a second class.

**I cannot make it to a class, do I need to let anyone know?**
If you cannot make it to a class, please notify your instructor at least 24 hours in advance (when possible) so that we can notify the next person on the waitlist.
LIFE INSURANCE QUESTIONS

How do I enroll for Group Universal Life (GUL) or Group Optional Term Life (GOTL) insurance and/or select beneficiaries?
Log on to HRMS (rochester.edu/people) and click on “Securian Life”
OR
Log on to www.lifebenefits.com and follow the instructions below:

- **User ID**: UR + Your 6-digit employee ID number (E.g. UR123456)
- **Initial Password**: Your 8-digit date of birth, followed by the last 4-digits of your Social Security Number (e.g. 012319011234)

What is the difference between GUL and GOTL insurance?

**Group Universal Life (GUL)**
- Pays the policy benefit and any accumulated cash value if the insured person dies during the term of coverage.
- Allows you to set aside money that can be used during your lifetime for longer term financial needs such as paying for college, buying a new home or building retirement funds.

**Group Optional Term Life (GOTL)**
- Pays the policy benefit if the insured person dies during the term of coverage.
- Often used to cover a specific need such as covering medical bills and burial or paying off a home mortgage.

You may continue all of your GUL coverage until age 100 if you terminate, retire from the University of Rochester or become ineligible for the plan.

You may continue your GOTL coverage, within limits, until age 70 if you terminate, retire from the University of Rochester or become ineligible for the plan.

How much will GUL or GOTL insurance cost?
Use the Interactive Rate Calculator, found on rochester.edu/benefits/life, to view the cost of different amounts of GUL or GOTL for you and Group Term Life for your dependents.
RETIREMENT QUESTIONS

Who is eligible for the University Contribution?
Regular full-time or regular part-time faculty or staff member, after two years of service*.

TAR staff are eligible if they satisfy the two-year service requirement* and if they work a minimum of 1,000 hours in the Plan Year (July 1-June 30).

*For eligibility purposes, a year of service means a 12-month period starting with the date you commence employment and any anniversary date thereof during which you complete 1,000 or more hours of service.

How do I waive the two-year service requirement to receive the University Contribution?
Service completed at any higher educational institution, teaching hospital, not-for-profit research foundation, or not-for-profit support organization for higher educational institutions, as well as service at a member of the controlled group of the University, will count towards the two-year service requirement.

To receive this service credit, you must complete a Retirement Service Credit Form, found on rochester.edu/benefits/forms. Complete the form within 90 days of your appointment date to receive University Contributions retroactively.

* Members of the controlled group of the University of Rochester include: Highland Hospital, Highlands at Brighton, Highlands at Pittsford, Highlands Living Center, Visiting Nurse Service (UR Medicine Home Care), Visiting Nurse Signature Care, High Tech Rochester, Nicholas H. Noyes Memorial Hospital, Jones Memorial Hospital, and F. F. Thompson Health System, Inc.

Who is eligible to make Voluntary Contributions?
All employees are eligible to make Voluntary Contributions; except you are not allowed to participate if you are a student whose employment is incidental to your education at the University. Detailed eligibility information can be found on the retirement eligibility & enrollment page.

In addition, eligible employees will be automatically enrolled (explained below) to make Voluntary Contributions.

What is Automatic Enrollment?
Effective July 1, 2017, newly hired or rehired eligible faculty and staff will be automatically enrolled to make their own contributions, unless you affirmatively elect a different percentage or affirmatively decline to make contributions within 60 days of becoming eligible to participate in the Plan.
Automatic contributions will be made from pre-tax eligible compensation each pay period at 3%. If you opt out within 60 days of becoming eligible, no contributions will be withheld from your paycheck. Once automatic Voluntary Contributions start, you may elect to change or stop Voluntary Contributions at any time.

How do I change my Voluntary Contribution, and when can I make this change?
You may elect to make Voluntary Contributions as soon as you are hired, and you may increase, decrease or begin making Voluntary Contributions any time during the year. Complete your election online at tiaa.org/rochester or via telephone at 800-410-6497, Monday to Friday, 8 a.m. to 10 p.m. and Saturday, 9 a.m. to 6 p.m. (ET).

What is the University’s Direct Contribution to the Retirement Program?
For the Plan Year during which you satisfy the eligibility requirements, Direct Contributions will be made on base salary paid for full payroll periods after you satisfy the eligibility requirements (i.e., after you complete two years of service.) The University Direct Contribution is calculated each pay period based on your eligible gross earnings, using your accumulated earnings throughout the plan year (July 1, 2019-June 30, 2020) and follows the formula below:

6.2% of each pay period’s earnings up to the “breakpoint“ ($59,200*), and contributions for earnings above the breakpoint are 10.5%, up to the IRS limit ($280,000*)

* Plan Year July 1, 2018 to June 30, 2019

Do I need to make Voluntary Contributions to receive the University Direct Contribution?
No, the University of Rochester Retirement Program is not a matching plan. For the Plan Year during which you satisfy the eligibility requirements, Direct Contributions will be made for base salary paid for full payroll periods after you satisfy the eligibility requirement, regardless of your Voluntary Contributions.

How do I view my University Direct Contributions?
The University Direct Contribution is contributed directly into your TIAA account, and contributions do not appear on your paycheck. To review your contributions, log into your TIAA account online at tiaa.org/rochester or review your quarterly statement.

After completing two years of service, what do I need to do to begin receiving the University Contribution?
You are not required to take action to begin receiving University Direct Contributions; however, you can complete your enrollment, elect your investment allocations, and designate your beneficiaries online at tiaa.org/rochester or by phone, 800-410-6497.
You will receive your first contribution on earnings from the first full pay period in which you are eligible. If you become eligible in the middle of a pay period, you will receive your first contribution with the next pay period's earnings.

What options do I have for my Voluntary Contributions?
You can contribute in one of the two ways listed below or a combination of both:

• Pre-Tax 403(b) - Tax-deferred Voluntary Contributions are deducted from your gross wages before amounts are taken out for income taxes and deductions. This reduces your taxable income by the amount of your Voluntary Contributions, which means you pay less in income taxes.
• Roth After-Tax 403(b) - With the Roth after-tax option, your contribution is taken out of your paycheck after your income is taxed, which does not lower your current taxes. Find detailed information on the Roth contribution option at rochester.edu/benefits/library/Roth_Contributions.pdf

What is the maximum that I can contribute from my salary to the Retirement Program?
Your combined pre-tax and Roth after-tax Voluntary Contributions to the Retirement Program may be made in any amount up to the limits imposed by the Internal Revenue Code. Maximum annual Voluntary Contribution limits for Calendar Year 2018

• For those under age 50—$18,500
• For those age 50 or older by December 31st—$24,500

Note: Any employee contributions made to another employer’s plan in the current calendar year count in applying the employee contribution limits (i.e., the $18,500 and $24,500 limits).

Can I roll over assets from another retirement account into the University’s Retirement Plan?
You may be able to 'roll' a distribution from another unrelated employer’s plan and certain IRAs to the Retirement Program, provided that the distributing plan or IRA was qualified and the following requirements are met:

• The distribution was not a required minimum distribution because of your age (70½ or older);
• The distribution was not part of a series of substantially equal periodic payments paid over 10 or more years, your lifetime, or the lifetimes of you and your beneficiary;
• The rollover does not include your own after-tax (Roth) contributions;
• The rollover was not a hardship distribution.
• Rollover contributions will be subject to the same withdrawal rules that apply to your Voluntary Contributions.

If you have any questions about rollover contributions or would like to initiate a rollover into the Retirement Program, contact the record keeper, TIAA, at 1-800-410-6497.
What options do I have for investing my Voluntary and/or University Contributions?
You may choose from wide range of mutual funds and annuity options from well-known financial providers. View the Investment Menu at rochester.edu/benefits/library/Investment_Menu.pdf for more information. Additional information on these funds, including performance, can be found at tiaa.org/rochester and select “Investment Options.”

Who can I talk to about my investment options?
TIAA can help you to understand, enroll, and manage your participation in the University of Rochester Retirement Program at no additional cost. Call 800-410-6497, or schedule an individual advice session, with a local TIAA financial consultant. To schedule a session, go to tiaa.org/schedule, select MEET AT TIAA, select New York, select Rochester or call 800-410-6497.

When can I withdraw my retirement accumulations?

Summary of When You May Withdraw Accumulations

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<tr>
<th>University’s Contributions</th>
<th>Voluntary Contributions</th>
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<td>• Upon severance from employment from the University and members of its controlled group</td>
<td>• Upon severance from employment from the University and members of its controlled group</td>
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<tr>
<td>• If you are a retiree and have returned to work, after age 59 ½</td>
<td>• After age 59 ½ for any reason</td>
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<td>• After age 70 ½ for any reason</td>
<td>• Prior to age 59 ½ if you:</td>
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<td>- Become disabled</td>
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<td>- Qualify for a hardship withdrawal</td>
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What options do I have with my retirement accounts when I sever from employment from the University and members of its controlled group?

When you sever from employment from the University and members of its controlled group, you have four options with your accounts:

• Continue to maintain your accounts with the University's record keeper, TIAA.
• Withdraw your accumulations. You will be required to pay ordinary income taxes, as well as a 10% penalty if you withdraw before the age of 59½ in most instances.
• Rollover your accumulations to an IRA*.
• Rollover your accumulations to another employer retirement plan, if the plan accepts the rollover.

Note: if you are currently employed by, or become employed by a member of the controlled group, you may not withdraw or rollover your University of Rochester Retirement Program accumulation.

* You cannot rollover Roth 403(b) accumulations to an IRA that does not qualify as a Roth IRA.
What is the difference between the 403(b) and the 457(b) plans?
The 403(b) Retirement Program allows eligible employees the opportunity to save for retirement on a tax-advantaged basis and provides a direct contribution toward retirement savings. The Deferred Compensation 457(b) Plan allows eligible participants to accumulate tax-deferred savings for retirement or other financial needs beyond the limits of the University of Rochester 403(b) Retirement Program. Detailed eligibility information for both plans can be found on the retirement website (rochester.edu/benefits/retirement).
RETIREE (POST-RETIREMENT) QUESTIONS

Am I eligible to retire?
The UR has established criteria in determining retirement eligibility. We use several key factors to determine eligibility and appropriate retirement grandparent level:

- Your hire date and employment status
- Years of cumulative service
- Your age at the time you plan on retiring

There are additional factors that are detailed in our Retiree Benefits Summaries. We encourage employees to read through the summaries, attend a Retiree Session (enroll on totalrewards.rochester.edu) and meet with a Retiree HR Representative.

How do I apply for a service credit?
You will need to complete a Retiree Service Credit form and submit it to the Office of Total Rewards for review. Forms can be found on rochester.edu/benefits/forms. 4Rs (those hired before 1/1/96) should complete the 4R Retiree Service Credit Form, and 5Rs (those hired 1/1/96 and after) should complete the 5R Retiree Service Credit Form.

Does the University of Rochester provide retiree health benefits?
Yes, we do. A comprehensive list of retiree health benefits can be found on rochester.edu/benefits/retirement/post-retirement/.

How do I enroll in retiree health care benefits?
You will need to complete MVP Enrollment Form and a Retiree Qualifying Event/Change Form. These forms can be found on rochester.edu/benefits/forms and should only be completed once you have met with a Retiree HR Representative and selected your retirement date.

How much does a retiree health plan cost?
Your cost for retiree health plan benefits are determined by the University health plan that you are enrolled in, your retirement grandparent level and the contribution from the University. Retiree health plan costs can be calculated at rochester.edu/benefits/retirement/post-retirement/rates.
How do I pay for my retiree health care plan?
You will be billed quarterly by Administrative Services for your retiree health and/or dental insurance. Covered spouses and domestic partners will be included on billing statements. The billing statement will include amount due, where to send payment and date payment is due by.
Example: Health and/or dental coverage for January, February and March will be billed in February.

When will my retiree health insurance begin?
If you enrolled in a University of Rochester Medicare Advantage plan, coverage will begin first of the month following your retirement date.
Example: You retire January 20th, your coverage will start February 1st.

What needs to be done once I or my spouse turns age 65?
Three months before turning age 65 you and/or your spouse should begin the process to apply for Medicare. If you are both currently working and are not covered by a UR Retiree Health Care Plan, you may not need to apply for Medicare. Please contact the Office of Total Rewards at 585-275-2084 to speak with Retiree HR Representative and review your situation.

What do Medicare Parts A, B & D cover?
Generally, Medicare Part A covers hospital care, skilled nursing facility care, nursing home care, hospice, home health services.

Medicare Part B covers medically necessary and preventative services such as clinical research, ambulance services durable medical equipment (DME), and inpatient/outpatient mental health.

Medicare Part D is prescription drug coverage. There are two ways to get prescription drug coverage – enroll in a Medicare Advantage plan that has Part D coverage or purchase drug coverage through Medicare Private Fee-for-Service plans and Medical Savings Account plans.

How do I sign up for Medicare Part A and B?
There are several ways to sign up for Medicare Part A and B. Apply online at Social Security, visit your local Social Security office or call Social Security at 1-800-772-1213.

What happens if I return to work Part-Time or Time-As-Reported after I retire?
You may be eligible for active employee health benefits and will become ineligible for retiree health benefits.

Who do I contact if I lost my Medicare card?
You may ask for a replacement Medicare card online at [www.ssa.gov](http://www.ssa.gov) using your online my Social Security account, call Social Security at 1-800-772-1213 or contact your local Social Security office.

**Who do I contact if I lost my health insurance card?**

Please contact the appropriate TPA/insurer:

- Excellus (health) 1-800-659-2808
- Excellus (dental) 1-800-724-1675
- Aetna 1-877-864-4583
- MVP 1-800-665-7924

**Who do I provide a Power of Attorney notice to?**

Power of Attorney (POA) documents should be emailed to retireebenefits@ur.rochester.edu or faxed to 585-273-1054 in confidence to the Post Retirement Administrator.

**Where can I get direct assistance or guidance with my Medicare and/or Health Insurance?**

HIICAP provides free, accurate and objective information, counseling and assistance on Medicare and other related health insurance information or coverage plans. You can contact a local HIICAP counselor at 1-800-701-0501 or visit their local offices webpage.

**What happens if I don’t elect retiree health care when I retire?**

If you choose to enroll in a plan outside of the University coverage, current policy allows for you to change to UR Retiree coverage if you experience a qualifying event or during the University Open Enrollment period (typically occurring in the Fall).
UNIVERSITY HOME OWNERSHIP INCENTIVE PROGRAM QUESTIONS

Am I eligible for the University Home Ownership Incentive Program?
Regular Full- and Part-Time Faculty and Staff members* are eligible for the University Home Ownership Incentive Program upon appointment.

*Postdoctoral fellows, postdoctoral research associates, postdoctoral teaching fellows, EDC associates, visiting faculty, and part-time assistant coaches are not eligible.

Do I need to be a first-time homebuyer?
No, but you need to be a new homeowner in a qualifying City of Rochester neighborhood (current city homeowners are not eligible).

Can I just receive the grant money from one of the participating lenders and the forgivable loan from the University of Rochester?
No, the University Home Ownership Incentive Program is “all or nothing.” You must be approved for the $3,000 forgivable loan from the University of Rochester, the $3,000 City grant, and the $3,000 grant/lender credit from a participating program lender.
YOUR BENEFITS EXTRAS QUESTIONS

VSP VISION CARE

Can I enroll in the vision plan without electing health coverage through the University?
Yes, you can elect vision coverage through VSP regardless of your healthcare enrollment.

Who can I add to my vision plan?
Dependents eligible to be covered on your vision plan include:
• Your current spouse or domestic partner and their children up to age 26
• Your children up to age 26
See the Health Care Program’s Benefit Eligible Dependents Definition for additional information regarding eligible dependents.

Can I use the UR medical and VSP when I see a provider or am looking to purchase glasses or contacts?
You can use either your UR medical plan or your VSP vision coverage for a specific service or purchase. When you visit a VSP participating provider, they will help you determine which coverage would be most beneficial for each visit/purchase.

When can I enroll in VSP?
New hires and newly eligible faculty and staff have 30 days to enroll. You can also enroll in VSP when you have a qualifying event or on an annual basis during Open Enrollment. See the Making Changes page at... for information regarding making benefit changes outside the enrollment period.

How can I find an in-network, VSP provider?
• Visit the VSP website at www.vsp.com
• Call VSP directly at 800-877-7195
  o Monday – Friday: 8 a.m. – 11 p.m.
  o Saturday: 10 a.m. – 11 p.m.
  o Sunday: 10 a.m. – 10 p.m.

Note: The VSP vision plan does offer out-of-network coverage, visit the VSP website at www.vsp.com for details on the differences between in-network and out-of-network coverage.

Will the premium for vision coverage be deducted from my paycheck?
Yes, your premium for vision coverage will be a pre-tax payroll deduction.

Where is my VSP card?
You will not receive a VSP card in the mail. When you go to your provider, you will let them know you have VSP and they will be able to apply the discounts. If you wish to print a member ID card, you can do so by registering and logging into www.vsp.com. Once you are logged in, access the link on the left side that says “Member Vision Card.” You should then be able to
print out a card. For registration instructions, see question: “How can I view my VSP benefit information?”

**How can I view my VSP benefit information?**
Visit the VSP site at www.vsp.com
- Select “Members”
- Create an account using your six-digit employee ID number with three zeroes in front of your ID number (your employee ID number is located on your paycheck or paystub, or contact your HR Business Partner if you need your employee ID number)
- Once you have logged in, you will be able to view information about your vision benefit

*Note:* You can also print a Member Vision Card to keep in your wallet. Click on the link in the left toolbar called Member Vision Card.

**Who do I contact if I have specific plan questions?**
Contact Corestream at 1-888-935-9595 or customerservice@corestream.com.

**HYATT LEGAL PLANS**

**When can I enroll in the Hyatt Legal Plans?**
New hires and newly eligible faculty and staff have 30 days from their hire/eligibility date to enroll. You can also enroll in the legal plan during open enrollment.

**Will the premium for the legal plan be deducted from my paycheck?**
Yes, your premium for the legal plan ($18.50/mo.) will be an after-tax payroll deduction.

**Once enrolled, do I need an ID number to obtain legal services?**
Yes, Hyatt Legal Plans will mail you a letter upon your enrollment, which will include your Hyatt-generated membership number. When you are ready to use the legal plan, simply give Hyatt Legal Plans a call at 800-821-6400 or log on to the members’ website at members.legalplans.com using the last four digits of your membership number and your zip code, and use our Attorney Locator to find an attorney near you. Once you’ve found an attorney, click on “Obtain Case Number” to get a case number to provide to the attorney when you call to make an appointment.

**GROUP AUTO & HOME INSURANCE**

**How can I get a free car insurance quote?**
Simply log into www.YOURBenefitsExtras.com and use the Auto Insurance Quote Comparison Tool anytime. You can compare quotes from Liberty Mutual, MetLife and Travelers in less than a minute! You can also contact Corestream at 1-888-935-9595 or customerservice@corestream.com.
TUITION BENEFIT QUESTIONS

What documentation do I need to provide to the Office of Total Rewards in order to receive my 70% tuition reimbursement?
Proof of completion (e.g. grade report or certificate), proof of cost, and proof of payment (e.g. billing statement/deferment form).

Are non-credit courses eligible for 70% tuition reimbursement?
Yes, as long as, the non-credit courses are taken at a college or university and meet the criteria of being directly job-related, having at least 15 contact hours, having outside readings and assignments, and having a formal evaluation based on a final exam.

Does part-time service count towards the service requirement for the 10-year Dependent Children Tuition Waiver Benefit?
No, only full-time service can be counted towards service requirement for the 10-year Dependent Children Tuition Waiver Benefit. This service requirement may be met by full-time service at another college or university that offered a tuition benefit plan for dependent children for which the faculty or staff member was eligible. To receive credit for full-time service completed at another college or university, please complete a Tuition Benefits Service Credit Form, found at rochester.edu/benefits/forms and submit it to the Office of Total Rewards for review within 30 days from the start of the course(s).

Are employee tuition benefits taxable?
Graduate tuition assistance benefits up to $5,250 in a calendar year are not taxable. Graduate tuition assistance benefits that exceed $5,250 in a calendar year are taxable wages unless the course satisfies the requirements for a tax deductible job-related course under IRS rules. Generally, a job-related course will satisfy these IRS requirements if it maintains or improves skills for the individual’s present job, or if the course meets the employer’s express requirements for retaining the job, and the course is not part of a program that will qualify the individual for a new trade or business. For taxable tuition assistance benefits, applicable Federal and State income taxes and FICA taxes will be deducted from the employee’s paycheck when the waiver is approved or the reimbursement is paid to the employee. In addition, the taxable income will be reflected on the W-2 for the calendar year when the actual tuition benefit is posted to the student’s account or reimbursed to the employee. Please see the flow chart for Determination Whether Graduate Tuition Assistance Benefits Exceeding $5,250 in a Calendar Year are Taxable

If my employee tuition benefits are not taxable, what form do I need to complete?
If you believe that your proposed graduate level course(s) satisfies the requirements for a tax deductible job-related course under IRS rules, please complete the University of Rochester Graduate Tuition Waiver/Reimbursement Tax Exemption Form on page 5 of the Employee Tuition Waiver/Reimbursement application.
LONG-TERM CARE INSURANCE QUESTIONS

Am I eligible for Long-Term Care (LTC) Insurance?
All benefit eligible and non-benefit eligible faculty and staff may apply for LTC. In addition, family members of faculty and staff are eligible to apply. All applicants must complete a Statement of Health and be approved by the insurance carrier before a policy will be issued.

FAQs regarding leave, disability, and vacation can be found on the Leave Administration website at rochester.edu/leave.