Nebraska

enrollment

2013

NUFLEX ENROLLMENT PERIOD: NOVEMBER 19 - DECEMBER 7, 2012

The University of Nebraska is pleased to present your NUFlex benefits enrollment information for 2013.

NUFlex enrollment is your annual opportunity to update your NUFlex benefits. You may enroll, cancel or change coverage elections for medical, dental, vision, life, long term disability, long term care and flexible spending accounts (previously known as reimbursement accounts) during this enrollment period. Between Nov. 19 and Dec. 7, 2012, you will be permitted to make changes to your NUFlex benefits for 2013.

There are several changes this year that may impact your benefit decisions for 2013, so please read all of the enrollment information carefully. Please take time to review your current benefits and make decisions that will be best for you and your family in 2013.

Additional NUFlex benefits information may be viewed on the University of Nebraska benefits webpage at www.nebraska.edu/benefits. As always, the University of Nebraska is here to help you through the NUFlex enrollment process. If you have any questions or need assistance, please call your Campus Benefits Office.

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What's New in 2013

Highlights for 2013

- Your benefits confirmation statement will be emailed to you this year. You will not receive a paper confirmation statement in the mail. (See page 4)
- Employee Plus One benefits coverage
 will take effect Jan. 1, 2013. You will have
 the opportunity to add newly eligible
 dependents during the NUFlex enrollment
 period. You must enroll for Employee
 Plus One coverage through your Campus
 Benefits Office. (See page 6)
- The Wellstream Health Risk Assessment is now easier to access. It is now available through the Firefly website when you enroll for benefits. (See page 7)
- Medical and dental premiums will not increase for full-time employees in 2013. (See pages 8 & 12)
- The Summary of Benefits and Coverage (SBC) documents are now available online at www.nebraska.edu/benefits as part of the federal health care reform legislation. (See page 8)
- Blue Cross Blue Shield of Nebraska has introduced a new website called "myblue". The website will help you better understand your health care. (See page 8)

- CVS Caremark will expand three of their prescription drug programs in 2013.
 CVS Caremark will contact you if you are impacted by one of the programs. (See page 11)
- Your vision care Explanation of Benefits (EOB) will now be provided to you through the EyeMed Vision Care website. Paper EOBs will no longer be mailed to members. (See page 12)
- The maximum contribution amount for the Health Care Flexible Spending Account will decrease from \$5,000 to \$2,500. We are making this change as part of the federal health care reform legislation. (See page 13)
- FSA and COBRA administration will be outsourced to a third party in 2013 to make the reimbursement process easier for employees. We will provide you with detailed information about the change early next year. (See page 13)
- The proof of insurability form to enroll or increase life insurance coverage is now available online through the Firefly website. (See page 14)



We are now on Facebook and Twitter! Like us on Facebook and follow us on Twitter to receive the latest news, reminders and tips about NUFlex enrollment.



Follow us on Twitter: @UNebraskaHR

Like us on Facebook: facebook.com/UNebraskaHR

Enrollment Checklist

Your	Enrollment Checklist
	Review this newsletter for details about your benefit options for 2013.
	Learn more by viewing a live informational meeting. (See page 5)
	Ask questions by calling your Campus Benefits Office.
	Review your current benefits by visiting the Firefly website at https://firefly.nebraska.edu.
	Enroll between 8:00 a.m. CST on Nov. 19 and 5:00 p.m. CST on Dec. 7 at https://firefly.nebraska.edu. You can enroll, cancel or change your coverage during this time.
Don't	forget to:
	Complete the Wellstream Health Risk Assessment – you must do this every year to receive the enhanced wellness and preventive services benefit.
	Enroll in Flexible Spending Accounts (previously known as reimbursement accounts) – you must do this every year.
	Designate your tobacco/nicotine status – you must do this every year.
	Provide dependent verification documentation if you are adding dependents to your coverage. Documentation must be received in your Campus Benefits Office by 5 p.m. on Dec. 7.
	Complete the online life insurance Statement of Health form if you are enrolling or increasing any life insurance coverage amounts. Proof of insurability requests must be completed online by 5 p.m. on Dec. 7, 2012.
	Review your NUFlex confirmation statement to make sure all of your elections are correct.

The information in this newsletter is intended to summarize the university's benefits plans in a manner that is clear and easy to understand. Every effort has been made to ensure that this information is accurate. It is not intended to replace the legal plan document, which contains the complete provisions of a program. In case of any discrepancy between this newsletter and the legal plan document, the legal plan document will govern in all cases. You may review the plan summaries online at www.nebraska.edu/benefits.

Benefits Enrollment

Remember to Update your Records

During enrollment, please remember to update your emergency contact information and your current and permanent addresses in Firefly. It is important that your contact information is up-to-date in case of an emergency.

Please also check to make sure that you have a Social Security number recorded in Firefly for each of your dependents. You must have a Social Security number on file for your spouse and each dependent child enrolled in the university's medical plan. If a Social Security number is missing, please contact your Campus Benefits Office to update your records.

Enroll online through the **Firefly** Employee Self Service website

How to Enroll

Update your benefits online through the Firefly Employee Self Service website at https://firefly.nebraska.edu. You can enroll, cancel or make changes to your benefits during the NUFlex enrollment period from Nov. 19 to Dec. 7, 2012 at 5 p.m. All benefit changes made during NUFlex enrollment will be effective on Jan. 1, 2013.

When you enroll for benefits online, the website will guide you stepby-step through the enrollment process. Before you begin online enrollment, we encourage you to watch the video tutorial available on the Firefly website.

Important: Please note that benefit changes must be completed by 5 p.m. CST on Friday, Dec. 7, 2012. You will not be able to add or change your benefits after this deadline. If you do not make changes during the enrollment period, you will keep your current benefits and will not be enrolled in the Flexible Spending Accounts and your voluntary life insurance coverage will be defaulted to the tobacco/nicotine premium.

Confirm Your Benefits

New for 2013: Your benefits confirmation statement will be emailed to you this year.

A confirmation statement will be emailed to you shortly after you complete online enrollment. Please review the statement carefully to make sure all of your elections are correct. You can go back in to Firefly and make changes as many times as you would like during the enrollment period. You cannot make corrections after 5 p.m. on Friday, Dec. 7. Your confirmation statement will also be available on the Firefly Employee Self Service website under the benefits section. Please note that you will not receive a paper confirmation statement in the mail this year.

Informational Meetings

The live NUFlex informational meetings will be offered online again this year, which will allow you to view the presentation from your home or office. To view a meeting online, visit https://connect.unl.edu/nuflex at one of the following times:

Informational Meeting Schedule		
Monday, Nov. 19, 2012 1:30 p.m 2:30 p.m.		
Monday, Nov. 26, 2012	1:30 p.m 2:30 p.m.	

The number of participants is limited for each informational meeting so we suggest you log in at least 10 minutes before the session begins. The agenda will be available online before the meetings at http://go.nebraska.edu/meetingagenda. If you experience any connection or technical issues, please contact the Adobe Connect Support line at (800) 422-3623.

Your Only Opportunity to Make a Change

Please remember that the NUFlex enrollment period is your only opportunity to enroll, change or cancel your benefit elections during the year. The choices you make during NUFlex enrollment will remain in place from January 1, 2013 through December 31, 2013. You cannot make changes to your benefits during the year unless you experience a permitted election change event. The following events would allow you to make changes to your benefits during the plan year:

- Birth or adoption
- Marriage
- Divorce
- Employment status
- Significant change to spouse's employer's benefits plan (subject to approval)

If you experience one of these events, you have 31 days to enroll or make changes to your coverage. Please remember that the benefit changes you make must be related to the event (e.g. changing from employee only to employee and spouse coverage after marriage).

Expecting a baby in 2013?

Remember to add your baby to your benefits coverage within 31 days of birth or adoption, or you won't be able to enroll your child until 2014 NUFlex enrollment. Submit the dependent information request form and the benefits change form, if applicable, to your Campus Benefits Office within 31 days. Forms are available online at www.nebraska.edu/benefits.



Employee Plus One Benefits

Earlier this year, the Board of Regents approved Employee Plus One benefits coverage. The new program will give benefits eligible employees the opportunity to enroll an "adult designee" and dependent children of the adult designee in the benefits program during 2013 NUFlex enrollment. Employee Plus One coverage will take effect Jan. 1, 2013. If you would like to enroll for coverage, please contact your Campus Benefits Office.

Is my adult designee eligible for coverage?

University benefits eligibility will be extended to an adult designee of the same or opposite gender who:

- has resided in the same residence as the employee for at least the past consecutive 12 months and intends to remain so indefinitely;
- is at least 19 years old;
- is directly dependent upon, or interdependent with, the employee, sharing a common financial obligation that can be documented in a manner prescribed by the university; and
- is not currently married to or legally separated from another individual under either statutory or common law.

Please see the Employee Plus One module on the benefits webpage for exceptions to the above.

Are there tax implications?

Yes. Please note that if your adult designee or your adult designee's children participate in the university's benefits plan, you will be taxed on the value of that benefit because of federal tax law. The exception to this rule is if the adult designee meets the IRS dependency guidelines. Before you enroll an adult designee, we strongly encourage you to get advice from a tax professional to find out if your adult designee and his or her children are your tax dependents.

How do I enroll my adult designee in coverage?

You must enroll for Employee Plus One coverage through your Campus Benefits Office. You will not be able to enroll online through the Firefly website.

Before enrolling for coverage, read all of the program requirements online at www.nebraska.edu/benefits, confirm that your adult designee is eligible for coverage, speak to a tax professional and contact your Campus Benefits Office.

To enroll for coverage: complete the following forms and submit them with all required documentation to your Campus Benefits Office before 5 p.m. on Friday, Dec. 7.

- Affidavit of Employee Plus One Relationship
- Certification Concerning Tax-Qualified Dependents for Employee Plus One Coverage
- Employee Plus One Benefits Change Form
- Dependent Information Request Form

Forms are available online at www.nebraska.edu/benefits.

Wellstream Health Risk Assessment

The University of Nebraska is committed to helping you take control of your health. To help you manage your health and health care costs, we are giving you the opportunity to complete the Wellstream Health Risk Assessment (HRA) again this year. This assessment will help you evaluate and monitor your health and you will receive the enhanced wellness and preventive services benefit for completing it. You can complete the HRA during the NUFlex enrollment period from Monday, Nov. 19 through Friday, Dec. 7 at 5 p.m.

New for 2013: We have made it easier for you to access the HRA this year. Now you can access it directly through the Firefly website instead of logging in to the Wellstream website. Click on the "Health Risk Assessment" link at the beginning or end of enrollment on Firefly. The link will take you directly to the survey and will automatically log you in. After you complete the HRA, you will receive a Personal Health Report. You must print or save the report to receive credit for completing the HRA.

Complete the HRA through Firefly during NUFlex enrollment

As always, your personal health information will remain confidential – the university will not have access to your individual survey data.

Enhanced Wellness and Preventive Services

If you complete the HRA and are enrolled in the university's medical plan, you will receive the following enhanced wellness and preventive services benefit for you and your covered family members in 2013:



\$300 allowance

\$600 allowance

\$0 copay

100% coverage

Annual preventive care allowance of \$300 (for insureds age 2 and over).

Dependent child (under age 2) preventive care allowance of \$600.

\$0 copay for generic prescription drugs through the CVS Caremark mail service program with no annual deductible.

100% coverage, up to a \$2,500 maximum, for a routine preventive colonoscopy once every 10 years beginning at age 50 (services must be provided by a PPO provider; out-of-network charges may apply if colonoscopy lab services are provided out-of-network or outside the state of where the colonoscopy is performed).

Medical Coverage

New for 2013

No Price Increases for 2013

For the fifth time in seven years, medical premiums will not increase for full-time employees in 2013. There will also be no increases to deductibles, coinsurance, stop-loss limits and prescription drug copays. NUCredits will remain the same for full-time employees. Rates for part-time employees (FTE of .50 to .95) will increase proportional to their FTE.

The university's contribution to the medical and dental plans increased \$1.8 million – an average of 2 percent for all coverages.

Summary of Benefits and Coverage (SBC)

The Summary of Benefits and Coverage (SBC) is a new document that summarizes important information about your health benefits. The SBC is designed to help you make informed decisions about which medical plan to choose. As part of the federal health care reform legislation, we have made the SBCs available to you at www.nebraska.edu/benefits.

Myblue

Blue Cross Blue Shield of Nebraska has improved the "myblue" website (previously called "Accessblue"). The website helps you make sense of your health care – for free and all in one place. You can access details about your health insurance, track your health care spending, find providers in your area, and more. Sign up at www.mynebraskablue.com.

Ancillary Services Benefit Change

We would like to remind you that as of Oct. 15, 2012, Blue Cross Blue Shield of Nebraska changed the way they handle claims for the following providers:

- Durable or Home Medical Equipment and Supplies –A supplier of hospital beds, oxygen tanks, crutches and more.
- Independent Clinical Laboratory A non-hospital based laboratory that handles analysis of blood and urine samples and more.

If you use one of the providers above and they are located outside of the Blue Cross Blue Shield of Nebraska network, you may have to pay more in deductibles, coinsurance and other costs. If you are using an in-network ancillary medical company that is located within the state of Nebraska, you will not be impacted by this change. We encourage you to use local ancillary service providers when possible to reduce your out-of-pocket costs.

A Frequently Asked Questions document about this topic is available at http://bit.ly/Y4FJHH.

Choosing the Right Medical Plan

You have three medical plan options through Blue Cross Blue Shield – low, basic and high. All options include prescription drug coverage through CVS Caremark. The plans differ in the premium, deductible, coinsurance and stop-loss amounts. Take time to compare the three options and find the right plan for you and your lifestyle.

	LOW	BASIC	HIGH	
What do you prefer?	Low: You would rather pay less each month and pay more when you receive medical care. You don't expect to have many medical expenses, but you have enough money on hand to pay the full deductible if you do need care.	Basic: You prefer a balance between the amount you pay each month and the amount you pay out-of- pocket when you receive medical care. Many people find that the basic option is the best choice, from a purely economic perspective.	High: You prefer to pay more each month so you can pay less when you receive medical care.	
Monthly Premiums (the	amount that is deducted from	your pay monthly for medical c	overage)	
-Single -Employee + Spouse -Employee + Child(ren) -Employee + Family	\$78 \$100 \$90 \$114	\$132 \$212 \$178 \$270	\$198 \$354 \$334 \$466	
	Annual Deductible (the amount you pay out-of-pocket for health care before the plan begins to pay. You are responsible for the deductible when you receive care.)			
-PPO -Non-PPO	\$1,550 single; \$3,100 family \$1,950 single; \$3,900 family	\$450 single; \$900 family \$650 single; \$1,300 family	\$300 single; \$600 family \$450 single; \$900 family	
Coinsurance (the percentage of an insurance claim that you are responsible for paying)				
-PPO -Non-PPO	You pay 30% You pay 45%	You pay 30% You pay 45%	You pay 20% You pay 35%	
Stop-loss (the maximum amount you will have to pay per year – not including your deductible)				
-PPO -Non-PPO	\$2,500 single; \$5,000 family \$2,900 single; \$5,800 family	\$1,600 single; \$3,200 family \$2,000 single; \$4,000 family	\$1,400 single; \$2,800 family \$1,700 single; \$3,400 family	

We encourage you to discuss your unique needs, financial status and health coverage concerns with your Campus Benefits Office to make sure you find the right plan for you and your family. More information is also available at www.nebraska.edu/benefits.

Prescription Drug Coverage

Prescription drug coverage through CVS Caremark is included in your medical coverage – you do not have to pay an additional premium to participate. You can fill your prescriptions in person at a participating CVS Caremark retail network pharmacy or by mail order.

Each covered person is required to establish an annual \$57 prescription drug deductible for brand-name drugs. Once you meet the deductible, you will pay the applicable prescription drug copay listed below.



DAY SUPPLY	UPTO 30	31-60	61-90
Generic	\$9 copay	\$18 copay	\$27 copay
Brand (on Formulary/ Primary Drug List)	\$31 copay	\$62 copay	\$93 copay
Brand (not on Formulary/ Primary Drug List)	\$52 copay	\$104 copay	\$156 copay

^{*}An annual \$57 deductible is also required for brand-name drugs for each covered person.

\$0 generic copay through CVS mail service if you complete the HRA

If you complete the Wellstream Health Risk Assessment and are enrolled in the university's medical plan, you can obtain generic drugs through the CVS Caremark mail service program for \$0 copay. The \$0 copay is not applicable at any CVS Caremark retail network pharmacy.

To order prescriptions through the mail service program, complete the mail service order form and send it to CVS Caremark with the original prescription(s) (not a photocopy) and the appropriate copay for each prescription, if applicable. The form is available online at www.nebraska.edu/benefits. You will receive your prescription within 10 to 14 days after CVS Caremark receives the order. You can also order by phone at (866) 239-4704, or online at www.caremark.com/faststart.

New for 2013

Formulary Management Strategy Program

The CVS Caremark formulary management strategy program will be expanded in 2013. The program impacts nonformulary brand name drugs and products, and requires you to get documentation from your physician to demonstrate the medical necessity for you to receive the specific drug or product. If medical necessity is documented and approved, you will pay the brand non-formulary copay. If medical necessity is not demonstrated, the drug will not be covered by the prescription drug plan and you will be responsible for the full cost of the drug.

CVS Caremark will contact you if you currently take one or more of these non-formulary brand name drugs. If you take one of these drugs, talk to your doctor to determine if a generic or brand formulary option is acceptable. More information, including a list of the impacted drugs, is available at www.nebraska.edu/benefits.

Step Therapy Program

The step therapy program will also be expanded in 2013 to encourage members to use preferred drugs instead of non-preferred drugs. This program enhances the use of safe, equally effective, and less expensive drugs before "stepping up" to a more expensive alternative. Generally, members are required to try a generic or preferred brand drug before a non-preferred brand is dispensed. The program was implemented in 2012 for the Proton Pump Inhibitor (PPI) drug class.

CVS Caremark will contact you if you are impacted by the step therapy program and work closely with your provider to transition to a different drug. More information, including a list of preferred drugs, is available at www.nebraska.edu/benefits.

Step Therapy Program for Specialty Drugs

The step therapy program for specialty drugs is similar to the step therapy program. It requires members to try a preferred brand drug before the non-preferred brand drug can be dispensed. This program impacts users of prescription drugs in the Tumor Necrosis Factor (TNF) and Multiple Sclerosis drug class. More information, including a list of the impacted drugs, is available at www.nebraska.edu/benefits.

Women's Preventive Care Services

The women's preventive care services provision under the Affordable Care Act will not apply to the university's medical plan. The university has a "grandfathered health plan", which makes the plan exempt from this provision. Contraceptives will not be covered for women free of charge; contraceptives will continue to be subject to the applicable deductible and copay through CVS Caremark. Our plan does provide the wellness and preventive services benefit, which can be used for your annual exam (the plan pays the first \$250 in preventive care expenses in full; \$300 if the HRA is completed). Our plan also covers the full expense of a routine mammogram once per year.

Dental and Vision Coverage

Dental Coverage

Dental coverage is offered through Blue Cross Blue Shield. Coverage includes a Preferred Provider option, which lowers your out-of-pocket expenses.

New for 2013: Dental plan premiums will not increase in 2013.

Monthly Dental Premiums		
Employee Only \$14.00		
Employee + Spouse \$22.00		
Employee + Child(ren) \$23.00		
Employee + Family \$37.00		
*Deductible, coinsurance and benefit maximum amounts are available online at www.nebraska.edu/benefits		

Vision Coverage

Vision coverage is offered through EyeMed Vision Care. Coverage includes eye exams, glasses or contact lenses, and other services at a reduced cost.

New for 2013: The EyeMed Vision Care Explanation of Benefits (EOB) will now be provided to you in electronic format through the EyeMed Vision Care website. Paper EOBs will no longer be mailed to members. If you prefer a paper EOB, you can change your delivery preference on the EyeMed Vision Care website at www.eyemedvisioncare.com.

Monthly Vision Premiums		
Employee Only	\$7.60	
Employee + Spouse	\$16.70	
Employee + Child(ren)	\$16.70	
Employee + Family \$20.96		
*Deductible, coinsurance and benefit maximum amounts are available online at www.nebraska.edu/benefits		

Flexible Spending Accounts (FSAs)

Flexible Spending Accounts (previously known as reimbursement accounts) allow you to set aside pre-tax money to pay for eligible medical and dependent day care expenses. Participation does not automatically renew each year so remember to enroll in the FSAs during NUFlex enrollment. A list of eligible expenses is available at www.nebraska.edu/benefits.

Health Care FSA

New for 2013: As part of the federal health care reform legislation, the annual Health Care FSA maximum contribution will decrease from \$5,000 to \$2,500 in 2013.

You can contribute up to \$2,500 in 2013.

Dependent Day Care FSA

The Dependent Day Care FSA maximum will not change in 2013 and will remain at \$5,000 per year.

You can contribute up to \$5,000 in 2013.

Plan Carefully

Plan your FSA contributions carefully. By law, you will forfeit (lose) any money remaining in your FSAs at the end of the calendar year. Estimate your medical and dependent day care expenses for 2013 before you enroll. You can calculate your expenses online at https://www.fsafeds.com/fsafeds/fsa_calculator.asp.



New for 2013: FSA administration will be outsourced to a third party vendor in early 2013 to make reimbursements easier for employees. A new vendor is currently being selected through a competitive bid process and we will provide you with detailed information in 2013 when the process is finalized. COBRA administration will also be outsourced to the same vendor. FSA and COBRA functions are currently administered in-house.

LTD Coverage and Life Insurance

Long Term Disability (LTD) Coverage

Long term disability coverage through Unum provides monthly benefits if you are unable to work for an extended period of time due to an illness or injury. You can purchase coverage to receive 50% or 66 2/3% of your annual salary with a 90 or 180 day waiting period if you become ill or injured.

Life Insurance

The university provides you with term life insurance equal to 1x your annual budgeted salary (up to \$120,000), at no cost to you. You also have the option to purchase additional life insurance through Assurity Life Insurance Company for yourself, your spouse, and/or your children.

Employer-Provided Life Insurance		
Coverage for: Coverage available:		
' '	1x your annual budgeted salary (rounded to the nearest \$100) — up to \$120,000	

Voluntary Life Insurance		
Coverage for:	Coverage available:	
Employee	Increments of \$25,000 – up to \$500,000	
Spouse	\$10,000, \$20,000 or \$50,000	
Child	\$5,000 or \$10,000	
*Premiums for voluntary life insurance are based on your age and your tobacco/nicotine use. Premium amounts are available online at www.nebraska.edu/benefits		

Important: Please remember to designate your tobacco/nicotine status on Firefly during NUFlex enrollment. **If you do not designate your tobacco/nicotine status during enrollment, your voluntary life insurance premium will be defaulted to the tobacco/nicotine premium.** Any material misrepresentation made to your tobacco/nicotine designation, including your tobacco/nicotine history use, may void your insurance pursuant to the policy's incontestable clause.

You may change your level of life insurance coverage during the NUFlex enrollment period. To enroll or increase your coverage, you must complete and submit the proof of insurability form by 5 p.m. on Friday, Dec. 7. If applicable, all underwriting examinations must be scheduled by Dec. 28, 2012, or the new coverage amounts will be denied.

New for 2013: The proof of insurability form is available online through the Firefly website this year. Paper proof of insurability forms are no longer available.

AD&D Insurance

Accidental Death & Dismemberment (AD&D) Insurance

The AD&D insurance plan through Assurity Life Insurance Company provides benefits if you or a covered family member dies or is dismembered (loss of eye, arm, leg, etc.) as result of an accident.

Accidental Death & Dismemberment (AD&D) Insurance		
Coverage for:	Coverage available:	
Employee	Increments of \$25,000 – up to \$250,000	
Employee + Family	Spouse: 50% of your coverage amount	
	Child: 10% of your coverage amount	
*Premium amounts are available online at www.nebraska.edu/benefits.		

New for 2013: Effective Jan. 1, 2013, AD&D premiums for a spouse and dependent children will be withheld on an after-tax basis, i.e., subject to state and federal income taxes and Social Security.



Update your beneficiaries!

A beneficiary is a person you choose to receive your life insurance and retirement benefits in the event of your death. It is very important for you to keep your beneficiary information up to date. You can change or update your beneficiary listing any time during the year. If you would like to change a beneficiary, please complete the beneficiary designation form. The form is available online at www.nebraska.edu/benefits. Your new beneficiary is effective the day that you sign the form.

Contact Information

If you have any questions regarding 2013 NUFlex enrollment, please contact your Campus Benefits Office.

UNL Campus Benefits Office	Call: (402) 472-2600 E-mail: benefits@unl.edu Send forms to: 32 Canfield Administration, Lincoln, NE 68588-0409
UNMC Campus Benefits Office	Call: (402) 559-4340 E-mail: benefits@unmc.edu Send forms to: 985470 Nebraska Medical Center, Omaha, NE 68198-5470
UNO Campus Benefits Office	Call: (402) 554-3660 E-mail: benefits@unomaha.edu Send forms to: 205 Eppley Administration Building, Omaha, NE 68182
UNK Campus Benefits Office	Call: (308) 865-8516 E-mail: benefitsunk@unk.edu Send forms to: 1200 Founders Hall, Kearney, NE 68849
UNCA Campus Benefits Office	Call: (402) 472-7162 E-mail: benefits@nebraska.edu Send forms to: 217 Varner Hall, Lincoln, NE 68583-0742

The University of Nebraska believes its medical plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans (e.g. the requirement for the provision of preventive health services without any cost sharing). However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act (e.g. the elimination of lifetime limits on benefits).

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to your Campus Benefits Office. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

