The University of Nebraska is pleased to present your NUFlex Benefits enrollment information for 2022.

Between Oct. 25 and Nov. 12, 2021, you will be permitted to make changes. You may enroll, cancel or change coverage elections for medical, dental, vision, life, accidental death and dismemberment, long term disability, long term care, health savings accounts, and flexible spending accounts during the enrollment period. You must designate your tobacco/nicotine status every year and if you want to take advantage of the enhanced wellness and preventative services you must complete the Health Risk Assessment.

Please read all of the enrollment information carefully. Take time to review your current benefits and make decisions that will be best for you and your family in 2022.

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

We encourage you to enroll early to avoid any last minute complications.
BENEFITS ENROLLMENT

What’s New in 2022

• Medical premiums for employees will increase an average of $3 to $18 per month for most employees in 2022. Please check www.nebraska.edu/benefits for your specific plan premiums. Deductibles, coinsurance, and out-of-pocket limits will not increase.

• Vision Coverage premiums will decrease an average of $1 per month in 2022. The vision plan coverage includes eye exams, glasses or contact lenses, and other services at a reduced cost. (see page 12 for details)

• Dental Premiums for employees will increase $1 per month in 2022. This is the first increase in dental rates for employees since 2014. The increase is necessary to keep pace with inflation and increased utilization. (see page 11 for details)

• The health insurance enhanced benefit coverage for completing the health risk assessment has been updated to include 100% coverage for a routine preventative colonoscopy once every 10 years beginning at age 45. The previous coverage started at age 50. (see page 7 for details)

• We have a new Health Risk Assessment (HRA) provider in 2022. The assessment has many of the same questions as prior assessments, but has a new look. This year’s HRA can be saved in the middle of completion and you no longer have to complete the HRA in one sitting. (see page 7 for details)

• You will be able to carry over any unspent Health and Dependent Care Flexible Spending Account funds from 2021 to the 2022 plan year. This means that any Health and Dependent Care flexible spending care account amounts that you do not use during the 2021 year can be carried over to the 2022 year. This action is permitted by federal COVID relief legislation and may not be permitted for the 2023 plan year, so please plan accordingly when making your 2022 elections. (see page 12 for details)

• Employer-Sponsored Health Savings Account (HSA) contribution limits will increase in 2022. For employees enrolled in the Qualified High Deductible Health insurance plan and who also have an employer sponsored Health Savings Account (HSA) the IRS contribution limits will increase by $50 for individual coverage and $100 for family coverage. (see page 10 for details)

• CVS Caremark annually updates its standard formulary.

Continued from 2021

• Your benefits confirmation statement will be emailed to you. You will not receive a paper confirmation statement in the mail. (See page 4)

• The Health Risk Assessment is easy to access. It is available through the Firefly website when you enroll for benefits. (See page 7)

• The Summary of Benefits and Coverage (SBC) documents are available online. Go to www.nebraska.edu/benefits as part of the federal health care reform legislation. (See page 8)

• An employer sponsored Health Savings Account (HSA) option is available. Employees must be enrolled in the University’s qualified high deductible health plan to take advantage of the HSA. The HSA will allow an employee to set aside personal pre-tax dollars into an HSA to be used for qualified medical expenses. (See page 10)
Enrollment Checklist

Do This Now

☐ Review this newsletter for details about your benefit options for 2022.
☐ Review your current benefits by visiting the Firefly website at https://firefly.nebraska.edu.

Do This Between October 25 – November 12

☐ Enroll between 8 a.m. CST on Oct. 25 and 5 p.m. CST on Nov. 12 at https://firefly.nebraska.edu.
   You can enroll, cancel or change your coverage during this time. Reminder: Firefly is available 24/7 anywhere there is Internet access.
☐ Complete the Health Risk Assessment to receive the enhanced wellness and preventive services benefit. You must do this every year.
☐ Enroll in Flexible Spending 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 Nov. 12, 2021.
☐ 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 Nov. 12, 2021.
☐ Review your NUFlex Benefits 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

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 Benefits enrollment period from Oct. 25 to Nov. 12, 2021, at 5 p.m. All benefit changes made during NUFlex Benefits enrollment will be effective on Jan. 1, 2022.

When you enroll for benefits online, the website will guide you 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, Nov. 12, 2021. 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. If you do not take the Health Risk Assessment you will not receive the Enhanced Wellness Benefits.

Confirm Your Benefits

A benefits confirmation statement will be emailed to you the day after you complete online enrollment. Please review the statement carefully to make sure all of your elections are correct. You can go back to Firefly and make changes as many times as you would like during the enrollment period. You cannot make changes or corrections after 5 p.m. on Friday, Nov. 12, 2021. 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.

Verify that your home address is correct. UMR and Ameritas will use this information to mail your plan information.

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.

Also, please check to make sure that you have a Social Security number recorded in Firefly for each of your dependents. If dependents are eligible for a Social Security number, you must have their number on file in the university’s medical plan. If a Social Security number is missing, please contact your Campus Benefits Office to update your records.
ID Cards

If you are a new enrollee, or make changes to your health and dental plans, your ID cards will be mailed to your home address in December. Pharmacy and medical insurance ID cards will be combined into one ID card. This single card from UMR will be used for both your prescription drug coverage and health insurance.

Assistance is Available

Your Campus Benefits Office is always able to help you through the enrollment process. If you need assistance, please call your Campus Benefits Office.

UNL (402) 472-2600 | UNMC (402) 559-4340 | UNO (402) 554-3660 | UNK (308) 865-8522 | UNCA (402) 472-2600

Your Only Opportunity to Make a Change

Please remember that the NUFlex Benefits enrollment period is your only opportunity to enroll, change or cancel your benefit elections during the year. The choices you make during NUFlex Benefits enrollment will remain in place from January 1, 2022, through December 31, 2022. You cannot make changes to your benefits during the year unless you experience an IRS permitted election change event. The following events would allow you to make changes to your benefits during the plan year within 31 days unless otherwise noted:

- Marriage
- Divorce
- Change in employment status
- Birth or adoption (for this event only, the plan now allows 60 days to make your change)
- Spouse’s loss of job/insurance or change of employment
- Death of employee, spouse, or family member

If you experience one of these events, you have 31 days to enroll or make changes to your coverage. 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). Please visit our website at https://nebraska.edu/faculty-and-staff/health-benefits/life-events-changes, to learn more about permitted election change events and the necessary steps to make changes.

Expecting a baby in 2022?

Remember to add your baby to your benefits coverage within 60 days of birth or adoption, or you won’t be able to enroll your child until 2023 NUFlex Benefits enrollment. The birth or adoption of a child is the only event where you are allowed 60 days to make the change. Submit the Dependent Information Request Form and the Benefits Change Form, if applicable, to your Campus Benefits Office within 60 days. Forms are available online at www.nebraska.edu/benefits.
Employee Plus One Benefits

The university provides Employee Plus One benefits to eligible employees. This is an opportunity to enroll an adult designee and dependent children of the adult designee in the benefits program during 2022 NUFlex Benefits enrollment. If you would like to enroll for this coverage, you must 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 not related to the employee;
- 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 web page 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 may be taxed on the value of that benefit because of federal tax law. One 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, Nov. 12, 2021:

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

Forms are available online at www.nebraska.edu/benefits
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 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 Benefits enrollment period from Monday, Oct. 25 through Friday, Nov. 12, 2021, at 5 p.m.

You can access the HRA directly through the Firefly website. Click on the “Health Risk Assessment” link at Medical Care Insurance tab or on the Health Assessment tab in 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.

**New for 2022 NUFlex benefits enrollment:** We have a new HRA provider. The assessment has many of the same questions as prior assessments, but has a new look. If you need assistance with the HRA please contact your campus benefits office. You will now be able to save your HRA in the middle of completion.

**REMININDER:** You will receive a confirmation report following your successful completion of the HRA survey. We recommend that you print or save the HRA report as proof that you completed the assessment.

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

### Complete the HRA through Firefly during NUFlex Benefits enrollment

### Enhanced Wellness and Preventive Services

If you complete the HRA and are enrolled in the university’s low, basic, or high medical plan, you will receive the following enhanced wellness and preventive services benefit for you and your covered family members in 2022. Only the employee will need to complete the HRA in order to earn benefits for all covered insureds on the plan.

- **$400 allowance**
  - Annual preventive care allowance of $400 (for insureds age 2 and over).

- **$0 copay**
  - $0 copay for flu shots administered at an in-network pharmacy and submitted to the prescription drug program.

- **$0 copay**
  - $0 copay for generic prescription drugs non-speciality through the CVS Caremark mail service program with no annual deductible.

- **100% coverage**
  - 100% coverage for a routine preventive colonoscopy once every 10 years beginning at age 45. (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.)
(BENEFITS ENROLLMENT)

Medical Coverage

Premium Rates Increases for 2022
Employee premium rates for most health insurance plans will increase by $3 to $18 per month for most employees in 2022. Please check www.nebraska.edu/benefits for your specific plan premiums. This increase is necessary due to medical and pharmacy cost inflation. Deductibles, coinsurance rates, drug co-pays, and out-of-pocket limits will not increase in 2022. The current deductibles for the PPO plans have been in place since 2010.

Carrier
UMR, a United Healthcare company, is the health insurance carrier. UMR has a custom phone number and website specifically for the University of Nebraska to assist plan participants. The website is www.umr.com/UofNE and the phone number is (844) 659-5059. These resources can assist with in-network provider searches, making appointments, checking eligibility for care management programs, and many other items.

Summary of Benefits and Coverage
The Summary of Benefits and Coverage (SBC) is a 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.

Telehealth Services
Health plan members and dependents will have access to telehealth services offered through Teladoc. Telehealth services can be utilized for common conditions such as sinus infection, cold, flu, ear infection, sore throat, migraine, fever, and abdominal pain. Teladoc gives you 24-hour/7-days-a-week access to medical providers through the convenience of phone, video or mobile app visits. These services are subject to coinsurance and deductible amounts. For more information, visit Teladoc.com or call 1-800-Teladoc.

Enhanced Provider Tier
The health plan has lower deductibles, co-insurance, and maximum out-of-pocket limits for services performed by Nebraska Medicine and associated providers. The existing deductibles, co-insurance rates, and maximum out-of-pocket limits for other in-network providers will not change. The services covered by the health plan will be the same for all providers. Please visit umr.com/UofNE and use the in-network provider search to find a complete listing of providers in the Enhanced Provider Tier.

Choosing the Right Medical Plan
You have four medical plan options through UMR—low, basic, high and the qualified high deductible. 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 four options and find the right plan for you and your lifestyle.
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. 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. You also have the ability to contribute to a health savings account.

**Qualified High Deductible Plan**

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.

<table>
<thead>
<tr>
<th>Monthly Premiums (The amount that is deducted from your pay monthly for medical coverage.) *</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>- Single</strong></td>
</tr>
<tr>
<td>$101</td>
</tr>
<tr>
<td>$170</td>
</tr>
<tr>
<td>$254</td>
</tr>
<tr>
<td>$101</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>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.)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>- PPO</strong></td>
</tr>
<tr>
<td>$1,550 single; $3,100 family</td>
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<tr>
<td>$450 single; $900 family</td>
</tr>
<tr>
<td>$300 single; $600 family</td>
</tr>
<tr>
<td>$2,800 single; $5,400 family</td>
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</tbody>
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<thead>
<tr>
<th>Coinsurance (The percentage of an insurance claim that you are responsible for paying.)</th>
</tr>
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<tbody>
<tr>
<td><strong>- PPO</strong></td>
</tr>
<tr>
<td>You pay 30%</td>
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<tr>
<td>You pay 30%</td>
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<tr>
<td>You pay 20%</td>
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<tr>
<td>You pay 20%</td>
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<table>
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<tr>
<th>Stop-loss (The maximum amount you will have to pay per year—not including your deductible.)</th>
</tr>
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<tbody>
<tr>
<td><strong>- PPO</strong></td>
</tr>
<tr>
<td>$2,500 single; $5,000 family</td>
</tr>
<tr>
<td>$1,600 single; $3,200 family</td>
</tr>
<tr>
<td>$1,400 single; $2,800 family</td>
</tr>
<tr>
<td>$900 single; $1,700 family</td>
</tr>
</tbody>
</table>

* The monthly premium pricing assumes you work at 100% FTE. For premium pricing with other FTEs see our website at nebraska.edu/benefits.

Please visit the UMR website, www.umr.com/UofNE, or call (844) 659-5059 for any additional questions.
Employer-Sponsored Health Savings Account (HSA)

The University of Nebraska offers an employer-sponsored Health Savings Account (HSA) option. Employees must be enrolled in the University’s qualified high deductible health plan to take advantage of the HSA. The HSA will allow an employee to set aside personal pre-tax dollars into an HSA to be used for qualified medical expenses. Employees that are age 65 and older who are also enrolled in any part of Medicare are not allowed to enroll in the HSA per IRS regulations.

Fidelity is the University’s provider of HSA services. To learn more about the services offered by Fidelity, please visit http://Fidelity.com/UseHSAvideo.

The chart below shows the annual HSA contribution limits for 2022:

<table>
<thead>
<tr>
<th>Coverage for:</th>
<th>Coverage available:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$3,650</td>
</tr>
<tr>
<td>Family</td>
<td>$7,300</td>
</tr>
<tr>
<td>Catch up allowed for those 55 and over</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

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.

The chart below summarizes the copayment structure for the low, basic, and high medical plan options. Note for the qualified high deductible health plan option you pay all health care costs, including pharmacy, up front until your deductible is met. For an explanation on how the prescription drug coverage would work on the qualifying high deductible health plan option, please visit caremark.com/hdhp.
<table>
<thead>
<tr>
<th>Day Supply</th>
<th>Up to 30</th>
<th>31-60</th>
<th>61-90</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$9 copay</td>
<td>$18 copay</td>
<td>$27 copay</td>
</tr>
<tr>
<td>Brand (on Formulary/Primary Drug List)*</td>
<td>$31 copay</td>
<td>$62 copay</td>
<td>$93 copay</td>
</tr>
<tr>
<td>Brand (not on Formulary/Primary Drug List)*</td>
<td>$52 copay</td>
<td>$104 copay</td>
<td>$156 copay</td>
</tr>
</tbody>
</table>

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

Continued in 2022, there will be a 30-day supply limit on specialty medication.

If you complete the 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 or for specialty medications.

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](http://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](http://www.caremark.com/faststart).

**Programs in 2022**

**Updates to the CVS Formulary** – Every year, CVS Caremark updates their formularies. Please visit www.nebraska.edu/benefits to see the formulary changes for 2022.

**Flu Shot Vaccinations** – For health plan participants that receive a flu vaccination in an in-network pharmacy, and also complete the Health Risk Assessment, there will be a $0 copay for the claim process with the prescription drug coverage.

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**Dental and Vision Coverage**

**Dental Coverage**

Dental coverage is offered through Ameritas. Visit [http://uofne.ameritasgroup.com](http://uofne.ameritasgroup.com) to view details on the Ameritas network or call their customer service line at (877) 495-5581 for additional information.

- Dental Plan premiums will increase $1 per month in 2022. This is the first increase in dental premium rates since 2014. The increase is necessary to keep pace with inflation and increased utilization.

**Monthly Dental Premiums**

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<table>
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<tbody>
<tr>
<td>Employee Only</td>
<td>$15</td>
</tr>
<tr>
<td>Employee + Spouse</td>
<td>$23</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$24</td>
</tr>
<tr>
<td>Employee + Family</td>
<td>$38</td>
</tr>
</tbody>
</table>

*Deductible, coinsurance and benefit maximum amounts are available online at [http://uofne.ameritasgroup.com](http://uofne.ameritasgroup.com)
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.

- Vision Care premiums will decrease about $1 per month in 2022. There is no changes to the program coverages.
- The contact lens allowance is $130.
- The frame allowance is $150.

<table>
<thead>
<tr>
<th>Monthly Vision Premiums</th>
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</thead>
<tbody>
<tr>
<td>Employee Only</td>
</tr>
<tr>
<td>Employee + Spouse</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
</tr>
<tr>
<td>Employee + Family</td>
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</tbody>
</table>

*Copay and benefit maximum amounts are available online at www.nebraska.edu/benefits

Flexible Spending Accounts (FSAs)

Flexible Spending Accounts allow you to set aside pre-tax money to pay for eligible medical and dependent care expenses. Participation does not automatically renew each year so remember to enroll in the FSAs during NU Flex Benefits enrollment. A list of eligible expenses is available on the WageWorks FSA website. A minimum annual contribution of $480 ($40.00/month) must be elected to enroll in the Health Care Flexible Spending Accounts.

New in 2022: You will be able to carry over any unspent Health Care and Dependent Care Flexible Spending Account funds from 2021 to the 2022 plan year. This means that Health Care and Dependent Care flexible spending care account amounts you do not use during the 2021 year can be carried over to the 2022 year. You must remain in an benefits eligible employee status in order to access the carry-over funds. Requests to be reimbursed using the carry-over funds for eligible expenses should be submitted to WageWorks. If you are planning to enroll in the qualified high deductible health plan and utilize a health savings account in 2022, you may want to waive your Health Care FSA carry over. If this is the case, please contact your campus benefits office.

Health Care FSA

The Health Care FSA maximum will be $2,750 per year.

* Reminder: If you enroll in a Health Care FSA you can not participate in a Health Savings Account (HSA).

Dependent Care FSA

The Dependent Care FSA maximum will not change in 2022 and will remain at $5,000 per year. You can contribute up to $5,000 in 2022.

Plan Carefully

Plan your FSA contributions carefully. You could forfeit (lose) any money remaining in your FSAs at the end of the calendar year. Estimate your medical and dependent care expenses for 2022 before you enroll.

Advantages of a Flexible Spending Account

- Save an average of 30% on a wide variety of eligible health care and dependent expenses
- Use several convenient, no-hassle health care payment and reimbursement options
Your Estimated Tax Savings

<table>
<thead>
<tr>
<th>Without Health Care FSA</th>
<th>With Health Care FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross annual pay (estimate)</td>
<td>$60,000</td>
</tr>
<tr>
<td>Estimated tax rate (30%)</td>
<td>- $18,000</td>
</tr>
<tr>
<td>Net annual pay</td>
<td>= $42,000</td>
</tr>
<tr>
<td>Estimated annual health care expenses</td>
<td>- $2,550</td>
</tr>
<tr>
<td>Final take-home pay</td>
<td>= $39,450</td>
</tr>
</tbody>
</table>

Take home this much more $660

WageWorks is the administrator for the University of Nebraska’s Flexible Spending Accounts. Participants may call WageWorks for account information and questions at (855) 428-0446 or by accessing their website at www.wageworks.com. Customer Service representatives are available Monday through Friday, 7 am to 7 pm CST.

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

<table>
<thead>
<tr>
<th>Coverage for:</th>
<th>Coverage available:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>1x your annual budgeted salary (rounded to the nearest $100) – up to $120,000</td>
</tr>
</tbody>
</table>

Voluntary Life Insurance

<table>
<thead>
<tr>
<th>Coverage for:</th>
<th>Coverage available:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>Up to $500,000</td>
</tr>
<tr>
<td>Spouse</td>
<td>$10,000, $20,000 or $50,000</td>
</tr>
<tr>
<td>Child</td>
<td>$5,000 or $10,000</td>
</tr>
</tbody>
</table>

*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 Benefits 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 Benefits enrollment period. To enroll or increase your coverage, you must complete and submit the online proof of insurability form by 5 p.m. on Friday, Nov. 12, 2021. If applicable, all underwriting examinations must be scheduled by Dec. 28, 2021, or the new coverage amounts will be denied.

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**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.

<table>
<thead>
<tr>
<th>Coverage for:</th>
<th>Coverage available:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>Increments of $25,000 – up to $250,000</td>
</tr>
<tr>
<td>Employee + Family</td>
<td>Spouse: 50% of your coverage amount</td>
</tr>
<tr>
<td></td>
<td>Child: 10% of your coverage amount</td>
</tr>
</tbody>
</table>

*Premium amounts are available online at [www.nebraska.edu/benefits](http://www.nebraska.edu/benefits).

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**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. The life insurance and accidental death and dismemberment beneficiaries are maintained in Firefly – Employee Self Service. Retirement plan beneficiaries are maintained with the plan vendors (TIAA and Fidelity).
Long Term Care Insurance

Long term care insurance can assist in paying the expense for long term care services received at home, in the community, or in a nursing facility.

You can choose between daily benefit choices of $100, $150, or $200. You can also make choices on the duration of the benefits and cost inflation protection.

For more information, or to enroll, go to Genworth.com/Nebraska.

Premium rates are provided on the website and vary based on level of insurance and age of the enrollee. Your acceptable enrollment will be subject to the Genworth underwriting requirements, which may include a physical and detailed health questions.

Contact Information

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

**UNL**
Campus Benefits Office  
**Call:** (402) 472-2600  
**E-mail:** benefits@unl.edu

**UNO**
Campus Benefits Office  
**Call:** (402) 554-3660  
**E-mail:** benefits@unomaha.edu

**UNMC**
Campus Benefits Office  
**Call:** (402) 559-4340  
**E-mail:** benefits@unmc.edu

**UNK**
Campus Benefits Office  
**Call:** (308) 865-8522  
**E-mail:** benefitsunk@unk.edu

**UNCA**
System Benefits Office  
**Call:** (402) 472-2600  
**E-mail:** benefits@nebraska.edu
The University of Nebraska believes its low, basic, and high 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 low, basic, and high 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.

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