Open Enrollment runs through May 31, 2022. The new plan year begins July 1, 2022 and ends June 30, 2023. Open Enrollment is your opportunity to enroll, cancel enrollment, or make changes to your coverage in the health care plan, enroll in a flexible spending account, enroll in basic life insurance, and/or enroll or cancel coverage in the MetLife Legal Plan.

Changes made during Open Enrollment will be effective on July 1, 2022 for the plan year that ends June 30, 2023. Flexible Spending Account (FSA) deductions will begin on the July 7, 2022 paycheck. To participate in FSA, you must reenroll each year, even if you want to keep the same election amount. New health plan rates and WellU participation changes will be reflected on the July 22, 2022 paycheck.

2022/2023 Plan Year News:

- Health Plan Rates Increase 8.43% for Departments and Employees
- Advantage Plan Changes to Deductibles, Out-of-Pocket Maximums, Coinsurance and Copays
- Consumer Directed Health Plan Information
- Updates to Fertility and Orthodontia Benefits
- Suggestions to Help Reduce Future Health Plan Expenses
- Complete the WellU Requirements by June 30, 2022
- Flexible Spending Accounts and Health Savings Accounts
- MetLife Legal Plan
- Other Benefits
- Use UBenefits, Your Online Tool for Open Enrollment and Other Benefit Changes

Employee Health Care Plan Rates

Taking into account the plan changes explained below, health plan rates for employees and departments will increase by 8.43%. The maximum premium rate increase that employees enrolled in the Preferred ValueCare network will see is $16.12 per month for family coverage.

University departments continue to pay approximately 90% of the total cost of coverage.

Because the health plan is self-funded, our health plan premium rates are directly related to the amount of medical and prescription drug claims.

Claims during the 2020/2021 Plan Year remained low because many people avoided getting medical and dental care unless their condition was critical. As a result, we were able to hold premiums for this current plan year without making any changes to the health plan design. However, we will not be able to do that for the coming plan year.

As of March 31, 2022, a total of 13,754 employees were enrolled in the health plan. Including employees’ family members, we are covering almost 35,000 individuals.

Over the past twelve months, the health plan paid total expenses of $210.7 million – an increase of over $20 million or 9.7% from the prior 12-month period, while the number of employees enrolled only increased by approximately 50 employees.
We can see the increase when we compare claims for medical and prescription drug claims for the past 12 months compared to the previous 12-month period.

The effect of COVID on claims is more evident when we look at the previous five 12-month periods. Claims increased steadily from 2017/2018 until 2020 and now appear to be increasing at the same or possibly a more rapid rate.

To account for the changing number of employees enrolled in the plan during each time period, we compare the average claims per enrolled employee per month during each 12-month period.

Premiums for the next plan year need to account for both the increasing cost of health care, as well as the anticipated increase in use of health care over the next 15 months. Now that COVID-19 vaccines are available and the infection rate is subsiding, University of Utah Health is seeing an increase in appointments. Additionally, we anticipate increased health care costs in the next year resulting from insufficient treatment of chronic conditions and missed preventive screenings during the past two years.

With our current plan design, we estimated the need to increase premiums by over ten percent. To avoid double-digit premium increases, we will be making health plan design changes that will require lower increases in premiums while adding to the cost health plan members will pay to obtain medical care. See the Advantage Plan Changes (next section) to see the new deductible, out-of-pocket maximum, coinsurance, and copay amounts.

See the Summary Comparison of Medical and Dental Benefits for additional coverage information and health plan premium rates.

Employees who complete the requirements to participate in the WellU Wellness Program will pay $40 less per month (or $50 for the CDHP option)
Advantage Plan Changes

The out-of-pocket maximums, deductibles, and coinsurance, and copay amounts in the Advantage Plan will change effective July 1, 2022. Coverage in the Consumer Directed Health Plan will not change.

The Employee Health Care Plan will continue to provide financial incentives to use University of Utah Health providers. Our University Health system is nationally recognized and has award-winning facilities and providers.

Out-of-Pocket Maximum: For the 2022/2023 Plan Year, each out-of-pocket maximum will be $2,500 per individual and $5,000 per family when you use a network provider. The out-of-pocket maximum is the highest amount you will be required to pay during the plan year for eligible expenses with a network provider. The out-of-pocket amounts increase if you use out-of-network providers. Each out-of-pocket maximum includes the amount you pay for deductibles, coinsurance, and copays. The plan has three separate out-of-pocket maximums: medical, prescription drug, and mental health/substance use disorder/autism spectrum disorder.

Plan Year Deductible: For the 2022/2023 Plan Year, if you receive care from a U Health and/or other network provider, your deductible will be $200 per member or $400 per family. If you use an out-of-network provider, your deductible will increase to $500 per member or $1,000 per family. A deductible is the amount you must pay before the plan begins paying for health care that is paid with a coinsurance.

All enrolled employees will receive new health plan ID cards at the end of June.

Coinsurance: For the 2022/2023 Plan Year, coinsurances for all health care will be:

<table>
<thead>
<tr>
<th></th>
<th>U Health Provider</th>
<th>Other Network Provider</th>
<th>Out-of-Network Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10%</td>
<td>30%</td>
<td>40%</td>
</tr>
</tbody>
</table>

A coinsurance is the percent you are required to pay after paying the annual deductible. The plan pays the balance for eligible expenses with a network provider.

For example, if you are admitted to the University hospital and the negotiated rate is $10,000, your coinsurance is 10%: you will be required to pay $1,000 and the plan will pay the remaining $9,000. However, if you have not yet met your deductible, you will pay the first $200 and then you will pay 10% of the remaining $9,800, or $1,180 total.

If you use an out-of-network provider, you will pay 40% of the amount a network provider would have agreed to accept, plus any balance of billed charges. Your 40% will apply to your out-of-pocket maximum. Amounts charged by an out-of-network provider for services above the amount a network provider has negotiated to accept do not apply to your out-of-pocket maximum.

Copays: For the 2022/2023 Plan Year, copays will be:

<table>
<thead>
<tr>
<th></th>
<th>U Health Provider</th>
<th>Other Network Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit</td>
<td>$20</td>
<td>$40</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>$40</td>
<td>$40</td>
</tr>
<tr>
<td>Spinal Manipulation</td>
<td>$40</td>
<td>$40</td>
</tr>
<tr>
<td>Hearing/Vision Exam</td>
<td>$20</td>
<td>$40</td>
</tr>
</tbody>
</table>

Copays apply to an office visit with a provider (including a nutrition consult or physical therapy). A copay is a set dollar amount that you pay for services with a network provider and the plan
pays the balance of the cost for the visit. You do not need to meet the deductible before a copay applies. If you see an out-of-network provider, a coinsurance will be applied.

**Prescription Drug 30-Day Maximum Out-of-Pocket:** The Advantage plan limits the amount you need to pay for each 30-day supply of a prescription drug. For the 2022/2023 Plan Year, the 30-day supply maximum will be:

<table>
<thead>
<tr>
<th>Maximum Out-of-Pocket for 30-day Supply</th>
<th>U Health Pharmacy</th>
<th>Other Network Pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$150</td>
<td>$250</td>
</tr>
<tr>
<td>Preferred Brand</td>
<td>$200</td>
<td>$250</td>
</tr>
<tr>
<td>Non-Preferred Brand</td>
<td>$250</td>
<td>$350</td>
</tr>
<tr>
<td>Specialty</td>
<td>$300</td>
<td>$500</td>
</tr>
</tbody>
</table>

As a reminder, specialty medications must be purchased through the University’s Specialty Pharmacy unless the pharmacy cannot obtain the medication or the patient is living outside Utah.

**Mental Health, Substance Use Disorder, and Autism Spectrum Disorder Coverage:** Benefits were increased last year and will be increased further this year.

- **Visit limits are being removed** on outpatient individual and group therapy sessions.
- **Residential treatment will be covered for up to 60 days** when medically necessary. Prior authorization is required.
- **An inpatient and residential treatment deductible** is being added.

For the 2022/2023 Plan Year, the coinsurance and copays for services will be changing to:

<table>
<thead>
<tr>
<th></th>
<th>HMHI/BHN Provider</th>
<th>Out-of-Network Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Services</td>
<td>10%</td>
<td>35%</td>
</tr>
<tr>
<td>Individual Outpatient Therapy</td>
<td>$20 Copay</td>
<td>35%</td>
</tr>
</tbody>
</table>

**Prior authorization may be required.** Contact the EAP for information or to obtain prior authorization.

The health plan uses the Huntsman Mental Health Institute Behavioral Health Network (not Regence’s network). HMHI/BHN anticipates implementing an online network provider directory in the next year. In the meantime, for referral to a network provider, individuals should contact the Employee Assistance Program at (801) 587-9319 or (800) 926-9619.

The HMHI/BHN network includes all University Health providers, as well as many other providers.

The Employee Assistance Program (EAP) is a no-cost option. Licensed counselors can help with common concerns including stress, anxiety or depression, personal and emotional issues, marital, relationship and family counseling, grief or loss, substance abuse or other addictions. The EAP has therapists available for same-day visits for individuals in crisis. Through 2022, the EAP is available to all University employees, including those in non-benefitted positions. When you use the EAP, there is no cost to you or your household members. The EAP is available 24/7 to assist in emergency situations. To reach the EAP, call (801) 587-9319 or (800) 926-9619.

**Consumer Directed Health Plan Information**

If you are considering moving to the CDHP health plan option this year, you will want to consider
the difference in the deductibles and out-of-pocket maximums between the Advantage and CDHP options compared to the premiums. If you are enrolled in the CDHP option, you can defer non-taxed amounts through payroll to your HSA. See the “Flexible Spending Account (FSA) or Health Savings Account (HSA)?” section below for additional things to consider.

Fertility Benefits Update

The University is proud to promote the equality, diversity, and inclusion of its employees. As we reviewed our benefit plans this year, to ensure they follow the University’s EDI values, we found that the fertility benefits we added last year had been incorrectly labeled in our plan documents as “Infertility Benefits”. A finding of infertility has never been required or intended for employees to access these benefits.

This plan year, the amount of claims paid by the plan for fertility benefits, was less than anticipated. As a result, we are able to increase the benefits for the 2022/2023 Plan Year to cover up to $10,000 in medical services and $3,000 in prescription drugs. We hope that this increased benefit will support all employees with a desire to add to their family. As a reminder, a flexible spending account can be used for fertility expenses not covered by the health plan.

Orthodontia Benefits Update

The Utah legislature increased the funding for dental benefits by 1%. With this additional funding, we are able to increase the orthodontia benefit from $2,000 to $2,500 for each individual enrolled in the health plan. This limit is a lifetime limit.

Help Keep Costs Down

You can help control future health plan expenses, which will potentially affect you through premiums, by making good decisions regarding your use of health care services and prescription medications.

The following are some recommendations to help you be a wise consumer.

Visit RedMed for your non-urgent injuries and minor illnesses. RedMed, located on the ground floor of the Union Building, is available to all employees at no cost. Providers at RedMed assess and treat work-related injuries and other non-emergency medical conditions.

Use University Health Virtual Urgent Care if you or your family members have a non-urgent injury or minor illness. U Health Virtual Urgent Care is available from 9am to 9pm, 7 days a week. You can access Virtual Urgent Care through MyChart (if you have an existing account) or online at https://healthcare.utah.edu/virtual-care/urgent-care/.

Use an urgent care facility instead of going to an emergency department for non-life threatening conditions. A visit to the emergency department can cost the plan up to five times more than a visit to an urgent care facility.

Purchase generics instead of costly brand-name medications – don’t be afraid to start with a less costly medication before trying an expensive brand-name medication.

Have appropriate preventive screenings – many illnesses can be treated easier and faster if they are discovered early.

Ask questions such as, if there is a more cost-effective option or facility.
Follow recommendations to treat chronic conditions – even if you begin to feel well. Continuing to follow your provider’s recommendation may avoid costly complications or worsening symptoms in the future.

Focus on your personal health and wellness by beginning with small steps such as parking farther away from the building, taking the stairs, or eating smaller portions.

WellU Wellness Program

By participating in the WellU Wellness Program, you focus on your own wellbeing, while saving up to $480 on health plan premiums annually. To participate next year (beginning July 1, 2022), you must complete the following by June 30, 2022:

- General Health Assessment (GHA) at least one time between July 1, 2020 and June 30, 2022; go to www.Regence.com, log in, scroll down, and click the “Go to Regence Empower” button in the Resources section
- Four WellU Wellness Activities

See the WellU flyer for details on WellU Wellness Activity options.

Flexible Spending Account (FSA) or Health Savings Account (HSA)?

You must reenroll in a Health FSA or Dependent Day Care FSA each year during open enrollment to participate, even if you want the same election amount.

Both Flexible Spending Accounts (FSAs) and Health Savings Accounts (HSAs) allow you to use non-taxed dollars for eligible expenses, which can make your dollars go farther.

Health FSAs and HSAs hold money you defer for future medical expenses incurred by you, your spouse, and other tax dependents. You can use these non-taxed dollars to cover items not covered by the health plan. Examples include your copays and coinsurance, contact lenses, eye glasses, etc.

There are several important differences between an FSA and an HSA. See the web page at www.hr.utah.edu/benefits/cdhp-hsa.php for information. To enroll in an HSA, you must be enrolled only in a health plan with a qualifying high deductible (including the U’s CDHP Plan) and you cannot have any funds remaining in an FSA. If you are changing from an FSA to an HSA this year, be sure to spend or get reimbursed for your entire FSA balance before July 1, 2022.

Dependent Day Care FSAs reimburse eligible day care costs for your eligible family members. To be an eligible day care expense, the care provided must be necessary to allow you and your spouse
(if applicable) to work. Eligible family members include your children under age 13 and other family members who are physically or mentally incapable of caring for themselves, reside with you for more than one-half of the calendar year, and are someone you could claim as a dependent on your taxes.

If you have an HSA, your contributions will continue. IRS rules limit the amount you may defer to these plans. You will see the current limits when you log into UBenefits.

### MetLife Legal Plan

The MetLife Legal Plan gives you access to expert attorneys who can assist you with a broad range of personal legal needs you might face.

The new Parents Plus enhancement allows your parents to have access to over 20 of the covered services currently included in the plan.

The monthly premium for enrollment remains $21.25 per month.

Plan enhancements for 2022 include:

- Parents Plus
- Protection from Domestic Violence
- Tax Audits
- Purchase/Sale of residence
- Property Tax Assessment
- Refinance/Home Equity Loans
- Boundary/Title Dispute
- Zoning Applications
- Immigration Assistance

If you are currently enrolled in the Legal Plan, your enrollment will continue for the next plan year unless you cancel your participation by contacting MetLife at 1 800 GET-MET 8 (1-800-438-6388) or visiting [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits) by June 30, 2022.

### Other Benefits

You may enroll in other benefits or apply for other insurance coverage at any time:

#### Life Insurance (proof of good health is required) –

You can enroll in basic life insurance (Part II and III) as part of Open Enrollment. Other life insurance is available on your life and on the lives of your spouse or domestic partner and dependent children. To enroll or increase your current insurance, complete the application at [www.hr.utah.edu/forms/lib/Personal-Health-Enrollment-Harford.pdf](http://www.hr.utah.edu/forms/lib/Personal-Health-Enrollment-Harford.pdf).

#### Short Term and Long Term Disability Insurance

(proof of good health is required) – This coverage provides an income replacement in the event your income ceases because you are unable to work as a result of an eligible disability. Coverage is available for employees only. To apply for coverage, complete the application at [www.standard.com/mybenefits/univutah/eeoi.html](http://www.standard.com/mybenefits/univutah/eeoi.html).

#### Supplemental Retirement Plans

– You may start or stop contributions, or change your contribution amount at any time through UBenefits.

#### Accidental Death and Dismemberment – AD&D

provides benefits in the event of a covered accident 24 hours a day, both on and off the job. No medical information is required to enroll. Coverage is effective after you enroll through UBenefits. Select coverage for yourself or for you and your eligible family members.

#### Auto and Home Insurance

– University employees and eligible family members may enroll in auto and home insurance at group rates through Farmers Insurance, Liberty Mutual, or Safeco Insurance.
Take Time to Review Your Beneficiaries!  Do you know who is listed as your beneficiary on your life insurance, retirement plans, and any other plans that provide a death benefit?  It’s not just a smart practice to review your beneficiaries – it is essential if you experience a major change in your life such as marriage, divorce or birth of a child or grandchild.  Updating your beneficiaries can save your loved ones from unnecessary grief during a difficult time.  You can view and update your beneficiaries for life insurance and AD&D through UBenefits.  View and update your retirement plan beneficiary designations by logging into your account with Fidelity Investments, TIAA, and/or Utah Retirement Systems.

For additional information on the University’s benefit plans, see the UHRM website at www.hr.utah.edu/benefits.

Use the Online UBenefits Open Enrollment Application

Log into UBenefits at ubenefits.app.utah.edu and click on the Open Enrollment tile to see your current Health Plan enrollment and make any changes.  You can also enroll in a Flexible Spending Account (you must reenroll to participate, even if you want to keep your current election) and enroll in Basic Life Insurance if you are not already enrolled.

To enroll or cancel your enrollment in the MetLife Legal Plan, go to www.metlife.com/mybenefits or call 1-800-GET-MET 8 on or before June 30, 2022.

Complete your online UBenefits enrollment between May 2 and May 31, 2022.

UBenefits:  http://ubenefits.app.utah.edu

If you don’t have access to a computer or need to submit a paper form, contact UHRM at (801) 581-7447 for assistance.

Privacy Policy
The University of Utah Employee Health Care Plan and the University of Utah Flexible Benefit Plan are required to follow strict federal and state laws regarding the confidentiality of Protected Health Information (“PHI”).  The Plans’ Notice of Privacy Practices describes the Plans’ practices relating to PHI and the rights members of the Plans have concerning their PHI.  The Notice of Privacy Practices is available at www.hr.utah.edu/ben/privacy.  To obtain a copy by mail, contact the UHRM Solutions Center at (801) 581-7447.

This newsletter contains only a general description of some of the features of the University’s Benefit Plans and is not intended to constitute a promise or contractual commitment by the University or a right to benefits under any of its employee benefit plans.  The University reserves the right to unilaterally change or terminate any or all of its employee benefit plans at any time and without prior notice.  Also, modifications may be necessary to comply with applicable legal requirements.  The exact details of the plans are included in the legal plan documents that govern each plan.  In the event of any inconsistency between a statement in this booklet and the plan document, the plan document will control.

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