

2022

BENEFITS GUIDE



This publication contains important information about your employee benefit program.

Please read thoroughly.



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WELCOME

As an Arkansas State University System employee, you play a tremendous part in our university's ultimate success. That's why our goal is to ensure that you are offered an attractive and competitive benefits program. We hope that, in addition to your compensation package, the selection of benefits offered through our program will help guarantee the financial, emotional, and physical security your family needs.

It is extremely important to our university to keep our employees engaged, productive, and committed to reaching shared goals and objectives. We also understand that being an employee is only part of your story; you have a life outside of your job here. That's why our benefits program is designed to help you achieve maximum potential at work and at home.

This benefits guide is an important way we communicate with you regarding our benefits program. Additionally, we hope this guide helps to educate and empower you as you elect the coverage and support that you and your family desire.

Important Information

Plan elections are binding for the remainder of the policy year unless you experience a qualifying life event. An IRS qualifying event consists of marriage, divorce, death or legal separation, change in work status, or termination or commencement of your spouse's coverage. If you experience a qualifying event, you will have 31 days from the date of the event to notify your human resources office and make adjustments to your elections.

MEDICAL SUMMARY

Schedule of Blue Advantage Administrators of Arkansas for January 1 to December 31, 2021, Plan Year

	Classic Plan		Premier Plan		Health Savings Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Deductible						
Individual	\$1,500	\$3,000	\$1,000	\$2,000	\$2,800	\$5,600
Family	\$3,000	\$6,000	\$2,000	\$4,000	\$5,600	\$11,200
Coinsurance						
	20%	40%	20%	40%	20%	40%
Out-of-Pocket Maximum						
Individual	\$4,000	\$8,000	\$3,000	\$6,000	\$6,550	\$13,300
Family	\$8,000	\$16,000	\$6,000	\$12,000	\$13,300	\$26,600
Office Visits						
Primary Care Physician	\$35 copay	40% after deductible	\$35 copay	40% after deductible	20% after deductible	40% after deductible
Specialists	\$50 copay	40% after deductible	\$50 copay	40% after deductible	20% after deductible	40% after deductible
Telemedicine	\$20 copay	N/A	\$20 copay	N/A	\$45 copay	N/A
Urgent Care	\$35 copay	40% after deductible	\$35 copay	40% after deductible	20% after deductible	40% after deductible
Hospital Services						
Inpatient	20% after deductible	40% after deductible	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Outpatient	20% after deductible	40% after deductible	20% after deductible	40% after deductible	20% after deductible	20% after deductible
Emergency Room	20% plus \$200 copay	40% plus \$200 copay	20% plus \$200 copay	40% plus \$200 copay	20% after deductible	20% after deductible
Preventive Care						
Annual GYN Exam	Covered 100%	Available in-network only	Covered 100%	Available in-network only	Covered 100%	Available in-network only
Wellness and Adult Immunizations	Covered 100%	Available in-network only	Covered 100%	Available in-network only	Covered 100%	Available in-network only
Well-Childcare and Immunizations	Covered 100%	Covered 100% for children under age 19	Covered 100%	Covered 100% for children under age 19	Covered 100%	Covered 100% for children under age 19
Prescription Drugs						
31-Day Supply						
Generic	\$12	Not covered	\$12	Not covered	80% after deductible	Not covered
Preferred Brand	\$50		\$50			
Brand	\$80		\$80			
Specialty Drug	\$100		\$100			
Maximum Annual Out-of-Pocket	\$2,000 individual/ \$4,000 family		\$2,000 individual/ \$4,000 family			
90-Day Supply						
Generic	\$36	Not covered	\$36	Not covered	80% after deductible	Not covered
Preferred Brand	\$150		\$150			
Brand	\$240		\$240			

Note: On HSA plan, preventive Rx is covered at 100% not subject to deductible.



HEALTH PLAN OPTIONS

ASU offers three different health plan options:

1. The Classic Plan utilizes the Arkansas True-Blue PPO Network and is a good choice for employees who primarily use Arkansas providers or providers in Memphis who are part of the Baptist network
2. The Premier Plan utilizes the National Blue Card Network and is generally the best choice for employees who utilize providers outside the state of Arkansas including Methodist in Memphis
3. The Health Savings Plan is a high deductible plan that utilizes the National Blue Card Network

A list of providers for the network is available on the Arkansas Blue Advantage website at: <https://secure.blueadvantagearkansas.com/healthcare-providers/#/ChooseNetwork>.

- ▶ For Classic, select True Blue PPO
- ▶ For Premier or Health Savings Plan, select Nationwide Providers



WELLNESS BENEFITS

Routine Adult Care

- ▶ Routine physical exam—\$0 copayment when you see an in-network primary care physician; the plan covers one physical exam per calendar year
- ▶ PSA (available for males age 40 and over)—\$0 copayment when you see an in-network physician, limited to one per calendar year
- ▶ Routine gynecological exam—\$0 copayment when you see an in-network physician. Includes office visit, pap smear, urinalysis, hematocrit or hemoglobin, and hemoccult stool culture; the plan covers one routine gynecological exam per year
- ▶ Mammography (screening)
 - ▷ In-network reimbursement rate 100%, no deductible; limited to one per calendar year
 - ▷ Limited to the following frequency schedule:
Age 35 through 39, one exam; age 40 and older, one exam every calendar year; Members with a family history may be eligible for annual exams before age 40
- ▶ Adult immunizations—\$0 copayment

Routine Child Coverage

- ▶ In-network provider—\$0 copayment available for children from birth through age 6
- ▶ Routine child immunizations—\$0 copayment available for children from birth through age 18

Tobacco Cessation Programs

Tobacco cessation assistance is covered under the plan. Over-the-counter drugs and prescription drugs are covered under the prescription drug card as long as the member has a prescription written by a valid provider.

Stay on top of your health and regularly scheduled preventive care—mammograms, routine physicals, and well-childcare.



PRESCRIPTION DRUG PLAN

- ▶ The medical plan includes a pharmacy benefit with copays of \$12 for generic prescriptions, \$50 for preferred brand names, \$80 for non-preferred brand names, and \$100 for specialty drugs
- ▶ If a generic is available, it will automatically be selected unless the employee elects to pay the difference between the cost of the brand name and the generic, plus the copay
- ▶ If a contraceptive is available as a generic, the brand name will not be covered under the plan, and not all contraceptives will be available free of charge
- ▶ Your Blue Advantage Administrators insurance card is also your pharmacy card
- ▶ For questions regarding your prescription drugs, please contact EBRX at **833.339.8402**

Use the Prescription Drug Price Quote Tool

- ▶ View medication cost based on your pharmacy plan, see if there are lower cost alternatives, and compare prices between MedImpact home delivery pharmacy and retail pharmacies

Contact Information

- ◆ **833.339.8402**
- ◆ **medimpact.com**

BLUECROSS BLUESHIELD OF ARKANSAS DENTAL INSURANCE

Maintaining healthy teeth and gums and seeking professional treatment when dental problems arise is important to your overall health.

Arkansas State University System offers two dental plan options: a high option and a low option. Both the high option and the low option cover diagnostic and preventive services at 100%.

The high option covers 80% of basic services, while the low plan covers 50% of basic services. Both plans cover 50% of major services. The high option also covers orthodontia for dependents 18 and under. The high option costs more than the low option.

Plan	High Option	Low Option
Deductible	\$50 per member	\$50 per member
Coinsurance		
Diagnostic and Preventive Services	Covered at 100%, no deductible	Covered at 100%, no deductible
Basic Restorative Services	Covered at 80% after deductible	Covered at 50% after deductible
Major Restorative Services	Covered at 50% after deductible	Covered at 50% after deductible
Annual Maximum	\$1,500 per member	\$1,500 per member
Orthodontia Services (Eligible Dependent Children Under Age 19)	Covered 50% after deductible \$1,500 lifetime maximum	No coverage
Maximum Rollover Benefit	\$500	\$500

Please refer to the ASU summary plan description (SPD) for plan coverage, limitations, and restrictions.





VSP VISION INSURANCE

Keep Your Eyes Healthy With Arkansas State University and VSP® Vision Care

Your eyes deserve the best care to keep them healthy year-after-year. Find an eyecare provider who’s right for you. To find a VSP doctor or retail chain affiliate, visit **vsp.com** and choose the VSP Choice option or call **800.877.7195**.

Benefit	Copay	Frequency
Well Vision Exam	\$10 per member	Every calendar year
Prescription Glasses		
\$150 Allowance for Wide Selection Of Frames	\$10 per member	Every other year
Single Vision, Lined Bifocal, and Line Trifocal Lenses	\$10 per member	Every calendar year
Polycarbonate Lenses for Dependent Children	\$10 per member	Every calendar year
Contacts (instead of glasses)		
\$150 Allowance for Contacts, Copay Does Not Apply		Every calendar year
Contact Lens Exam (fitting and evaluation)	\$60	Every calendar year

Covered lens enhancements now include UV coating, tinted lenses, and color coating.

Please refer to the ASU summary plan description (SPD) for plan coverage, limitations, and restrictions.

Choice of Providers

You may choose any eyecare provider—your local VSP doctor, a retail chain affiliate, or any other provider. Once your benefit is effective, visit **vsp.com** for your complete benefit description and choose the VSP Choice option, or view the plan summary located on the employee portal.

FLEXIBLE SPENDING ACCOUNTS

Healthcare Reimbursement

The healthcare FSA permits you to pay for unreimbursed healthcare expenses for you and your family on a pre-tax basis. Each year you set aside an amount of money through fixed payroll deductions to help pay for expenses, such as deductibles, coinsurance, or healthcare services not covered under your healthcare plan.

Under the pre-tax healthcare reimbursement benefit, you may choose to contribute any amount up to \$2,750 annually. As you incur eligible expenses, simply swipe your ConnectYourCare card. The card automatically pays for and substantiates most eligible expenses at the point of purchase. If you do not use the ConnectYourCare card to pay for an eligible expense, simply log into your online or mobile account, click add a new request for payment or reimbursement, enter the required information, and follow the instructions to submit your documentation via upload, fax, or postal mail. You may receive your reimbursement by check or direct deposit.

Arkansas State University offers flexible spending account arrangements that provide an important tax advantage. A flexible spending account (FSA) is an employer-sponsored plan that lets you deduct dollars from your paycheck and put them into a special account that's protected from taxes. The monies in these accounts can be used to pay for qualified expenses incurred for healthcare or daycare. The IRS requires that you forfeit any funds left in your account after the end of the plan year. You will have until March 15 of the following year to spend your healthcare FSA fund, so you'll want to estimate your annual contribution needs carefully.

Dependent Daycare Reimbursement

The dependent daycare FSA permits you to pay for certain dependent childcare and expenses for certain dependents who are incapable of self-care on a pre-tax basis. Like the healthcare FSA, you set aside an amount of money through fixed payroll deductions to help pay for expenses, such as babysitters, childcare centers, and specialized care for your parents living with you, or a spouse who cannot care for himself or herself.

Under the dependent daycare reimbursement benefit, you may elect to contribute up to \$5,000 per year (Note: if your spouse also participates in a pre-tax daycare account, your combined contribution total must not exceed \$5,000). Contributions are automatically deducted from your regular paychecks. After you pay your daycare provider, you submit proof of your expense and a reimbursement check is sent to you. It's that easy!



HOW DO I USE MY HSA?

There are two components to the HSA Plan

1. The plan—the plan requires that you meet a deductible (the point at which coinsurance begins) before the plan will pay for any expenses. The plan is considered an employer benefit subject to ERISA rules.
2. The health savings account (HSA)—this is a voluntary tax-preferred account that permits you to save money on a pre-tax basis to be used for qualified medical expenses. The IRS requires you to meet specific eligibility rules to open and contribute to an HSA. Enrollment in the plan does not automatically qualify you for the HSA—the HSA eligibility rules can be used to determine whether you qualify. The HSA is not considered an employer benefit subject to ERISA rules.

Examples of Qualified HSA Expenses*

- ▶ Inpatient and outpatient costs
- ▶ Prescriptions
- ▶ Dental care and braces
- ▶ Eye exams and surgery
- ▶ Glasses and contacts
- ▶ Mental healthcare
- ▶ Medical supplies
- ▶ Fertility treatment
- ▶ Nursing home care

* You are ultimately responsible for ensuring your expenses are qualified. This is not a complete list of qualified expenses. Visit [irs.gov](https://www.irs.gov) for additional guidance.

Pay Your Way

With our HSA program, you can pay for eligible expenses quickly and easily. Choose the option that's most convenient for you.

HSA Debit Card



Use your debit card at the doctor's office, pharmacy, or when paying a bill through the mail. HSA debit cards can be ordered for your spouse and tax dependents too.



Pay Online

Pay your bills online in a few simple steps from your smart phone or computer.



Reimburse Yourself Later

If you don't have your card or don't have enough money in your HSA—that's okay! Reimburse yourself from your HSA later that day, later that week, or many years from now.

What Expenses are Eligible for Reimbursement From an HSA?

An HSA may reimburse IRS-qualified medical expenses incurred by you, your spouse, and your tax dependents (even if the spouse and dependent children are not enrolled in the HDHP). Learn more about eligible expenses by visiting [irs.gov](https://www.irs.gov) and view section 213(d) of the tax code.

In addition to qualified medical expenses, the following insurance premiums may be reimbursed from an HSA.

- ▶ COBRA premiums
- ▶ Health insurance premiums while receiving unemployment benefits
- ▶ Qualified long term care premiums (the reimbursable amount depends on one's age)
- ▶ Any health insurance premiums paid, other than for an insurance carrier supplemental "Medigap" policy, by individuals age 65 and over

Can Ineligible Expenses be Paid for or Reimbursed From an HSA?

Technically, yes. You are in charge of your account and spending your funds appropriately. The company doesn't monitor this for you. If you use your HSA to pay for something that's not qualified by the IRS or likewise reimburse yourself for a purchase that's not qualified, you may be taxed and penalized for that expense.

What Expenses are Not Eligible for Reimbursement From an HSA?

The following expenses may not be reimbursed from an HSA.

- ▶ Premiums for an insurance carrier supplemental policies
- ▶ Expenses covered by another health plan
- ▶ Expenses incurred prior to the date the HSA was established

How Much Can I Contribute?

The IRS limits how much you can contribute into your HSA each year. These limits include any employer money contributed to your account.

- ▶ Individual coverage—\$3,600
- ▶ Family coverage—\$7,200

Age 55 or Older?

You may be able to contribute an additional \$1,000 per year on top of these limits.



UNUM LIFE INSURANCE

Group Life and AD&D

Arkansas State University provides basic life insurance for benefit-eligible employees and their families. Basic life insurance for employees is equal to 1.5 times your annual salary up to a maximum benefit of \$50,000.

Dependent Coverage	Benefit
Basic Life—Spouse	\$2,000*
Basic Life—Children (live birth to six months)	\$1,000
Basic life—Children (six months to 19 or 25 if full-time student)	\$2,000

* Please note that an employee cannot be covered as a spouse or dependent on dependent or supplemental spouse or supplemental child life.

Additional Term Life Insurance

You also have the opportunity to purchase additional term life insurance through Unum as a new hire or during open enrollment without evidence of insurability. Open enrollment increases are limited to one increment without evidence of insurability. However, you may apply for additional coverage by submitting evidence of insurability forms.

You may purchase term life insurance on yourself in increments of \$25,000. Premium is based on age and increases as you get older.

You may purchase additional term life on your family if you have purchased additional life insurance on yourself. Premiums on spouses are based on your age and will increase as you get older. For spouse coverage over \$25,000 or for an increase of more than \$5,000 during open enrollment, you must complete an EOI form.

Optional life coverage amounts reduce at age 65, 70, 75, 80, 85, and 90.

Optional Accidental Death and Dismemberment (AD&D)

Optional accidental death and dismemberment insurance is also available for you and your family. You may purchase coverage in increments of \$25,000.



UNUM LONG TERM DISABILITY

Long Term Disability (LTD)

Arkansas State University provides long term disability insurance for benefits eligible employees. ASU pays 100% of the premium. The plan is administered by UNUM.

- ▶ Long term disability provides income if you become disabled and are no longer eligible to work
- ▶ You are covered under the long term disability plan on the first of the month following 90 days of employment
- ▶ Benefit is 60% of salary up to a maximum of \$6,000 per month
- ▶ There is a 180-day elimination period before you are eligible for benefits if you become disabled
- ▶ Two-year, pre-existing condition clause

For more detailed information, please review the summary plan document at asusystem.edu.



NEW THIS YEAR—MASA MEDICAL TRANSPORT SOLUTIONS

Enroll in the Emergent Plus plan today and protect you and your family against the financial burden of massive out-of-pocket ambulance costs, all at an affordable group rate.

Emergent Plus Membership Benefits

A MASA MTS Membership provides the ultimate peace of mind at an affordable rate for emergency ground and air transportation service within the United States and Canada, regardless of whether the provider is in or out of a given group healthcare benefits network.

After the group health plan pays its portion, MASA MTS works with providers to deliver our Members \$0 in out-of-pocket costs for emergency transport.

Emergent Air Transportation

In the event of a serious medical emergency, Members have access to emergency air transportation into a medical facility or between medical facilities.

Emergent Ground Transportation

In the event of a serious medical emergency, Members have access to emergency ground transportation into a medical facility or between medical facilities.

Non-Emergency Inter-Facility Transportation

In the event that a member is in stable condition in a medical facility but requires a heightened level of care that is not available at their current medical facility, Members have access to non-emergency air or ground transportation between medical facilities.

Repatriation/Recuperation

Suppose you or a family member is hospitalized more than 100-miles from your home. In that case, you have benefit coverage for air or ground medical transportation into a medical facility closer to your home for recuperation.



UNUM SHORT TERM DISABILITY

Short Term Disability Coverage

ASU offers employees the ability to purchase short term disability insurance. Short term disability provides income if you are unable to work due to a qualified illness or accident.

Plan Information

- ▶ Employees pay 100% of the premium
- ▶ The plan is administered by UNUM

Available Plans

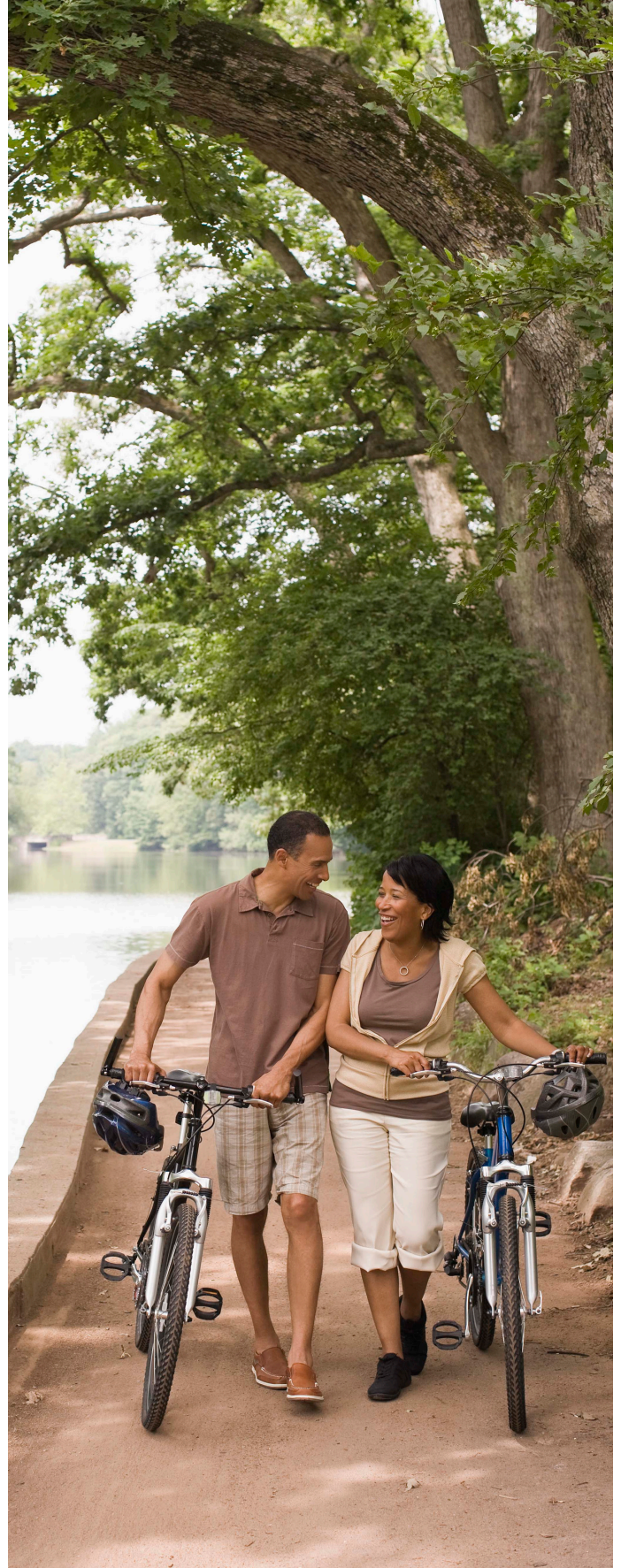
- ▶ Plan 1 begins payment on the 8th day off work and pays up to 26 weeks
- ▶ Plan 2 begins payment on the 15th day off work and pays up to 26 weeks
- ▶ You must meet plan requirements to qualify for disability payments; pre-existing condition period of one year must be met in order to be eligible for benefits

Rates

Rates are based on age and the amount of disability insurance you purchase. You may purchase insurance to cover up to 66 2/3% of your weekly salary, up to \$600.

Enrollment

You may enroll during your first 30 days of employment, or you may apply for coverage during annual open enrollment.





CANCER INSURANCE

Arkansas State University offers employees the opportunity to purchase cancer insurance through USABLE life. Employees may enroll within 31 days of hire, or during open enrollment. Employees may purchase individual plans as well as family plans. Evidence of insurability is required.

USABLE life offers three levels of cancer plans that pay cash to employees diagnosed with cancer. The plans cover hospital confinements, radiation, chemotherapy, and surgery. Below are some highlights for each plan. Please review the USABLE brochure and summary plan description for more information.

	Plan I	Plan II	Plan III
Inpatient Hospital Confinement	Pays \$100 per day for first 60 days, \$200 for each subsequent day	Pays \$250 per day for first 60 days, \$500 for each subsequent day	Pays \$300 per day for first 60 days, \$600 for each subsequent day
Inpatient or Outpatient Radiation, Chemotherapy and Blood, and Plasma	\$5,000 maximum per calendar year	\$10,000 maximum per calendar year	\$15,000 maximum per calendar year
Inpatient or Outpatient Surgery and Anesthesia	\$1,000 maximum per operation	\$2,000 maximum per operation	\$4,000 maximum per operation

RETIREMENT

Retirement Plan Options

ASU offers a 403(b) retirement plan to all benefit eligible employees. All benefit eligible employees must contribute to the plan as a condition of employment. In addition all employees, except student employees, may make voluntary pre-tax contributions to a 403(b) and/or 457(b) plan.

Retirement Plan Information for Benefit Eligible Employees*

- ▶ ASU contributes an amount equal to 10% of your salary, and you contribute an amount equal to 6% of your salary
- ▶ Contributions begin on your first paycheck, or retroactive if your benefit enrollment is not completed before your first paycheck is issued
- ▶ TIAA is our provider
- ▶ Employer contributions vest after one year of employment

Supplemental Plan Information for All Employees (except students)

- ▶ Employees may make voluntary pre-tax contributions to a 403(b) or a 457(b)
- ▶ TIAA is our provider

Supplemental Plan Enrollment

You may enroll at any time of year, including open enrollment. Elections made during open enrollment will begin on January 1. Elections made at other times of the year will be effective on the first pay period after the elections is made.

Employees may make investment elections at www.tiaa.org/astate.

* Employees hired prior to 1/1/2012 may participate in APERS or ARTRS for the primary retirement plan.

If you currently have VALIC as your retirement provider, we will continue to payroll deduct and contribute to your account.



CONTACT INFORMATION



General Benefits Questions

888.888.8888
www.website.com



Life and Disability

888.888.8888
www.website.com



Medical and Prescription

888.888.8888
www.website.com



Employee Assistance Program

888.888.8888
www.website.com



Health Savings Account (HSA)

888.888.8888
www.website.com



401(k)

888.888.8888
www.website.com



Flexible Spending Account (FSA)

888.888.8888
www.website.com



Accident

888.888.8888
www.website.com



Dental

888.888.8888
www.website.com



Critical Illness

888.888.8888
www.website.com



Vision

888.888.8888
www.website.com



Hospital Indemnity

888.888.8888
www.website.com



Notes



This benefits guide is only intended to highlight some of the major benefit provisions of the company plan and should not be relied upon as a complete detailed representation of the plan. Please refer to the plan's summary plan descriptions for further detail. Should this guide differ from the summary plan descriptions, the summary plan descriptions prevail.