

The University of Dayton is proud to offer you a comprehensive benefits package that promotes and supports your physical and emotional well-being. Annually, during Open Enrollment, you have the opportunity to choose your benefits for the next year. We encourage you to take a close look at your benefits options so you can choose the best fit for you and your family. The information in this guide will also help you learn about the resources available to help you live well.

WHEN TO ENROLL

Currently Eligible Employees must enroll in 2022 benefits during Open Enrollment: October 26–November 8, 2021.

Newly Eligible Employees must enroll in 2022 benefits within 30 days of the date they become eligible for benefits.

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BENEFITS FOR 2022

Your health and well-being is a priority at the University of Dayton, and we're committed to making sure you have the resources you need to lead a healthy lifestyle. Each Open Enrollment, we evaluate the benefits we offer to make sure you're getting those resources, and to ensure that our costs remain sustainable. This way, we can offer you excellent benefits today, in 2022 and throughout your career with the University.

YOUR 2022 HEALTH PLANS

The University works hard to provide you with options and flexibility to meet your needs and the needs of your family. That's why we offer you several health care plans to choose from. Before making any benefit decisions, read about and compare each of your options. Even if you're comfortable with the coverage you have now, it's important to know what your options are. Don't miss the opportunity to enroll in the coverage that's right for you. Everyone will be receiving new Anthem ID cards for 2022. Thay should arrive prior to Jan 1, 2022.

THIS YEAR YOU MUST MAKE AN ELECTION

All University of Dayton employees who wish to enroll in 2022 benefits – and those who wish to waive coverage – must participate in the upcoming Open Enrollment period: Monday, October 26, through November 8, 2021 at 4:30 p.m.

IN- OR OUT-OF-NETWORK?

All of your plans rely on a network of providers. These providers have agreed to offer you lower fees for medical care in exchange for being part of your network. This means you get lower rates when you stay in-network.

You may visit providers outside of the plan's network, but you will pay a separate deductible and a greater portion of the cost. To find out if your providers are in-network, or to find a new provider, visit Anthem's online directory at www. anthem.com. Then, click on Blue Access Preferred Provider Organization (PPO) for all health care plans.

Your Health Plan Options

You have a choice of three medical plans for 2022: the Core PPO, Advantage PPO and Consumer Driven Health Plan (CDHP). This chart illustrates how they compare to one another.

	Core PPO Plan		Advantage PPO Plan		Consumer Driven Health Plan (CDHP)	
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Free HSA Funding from the University of Dayton Employee only/Other than Employee Only	Not Applicable		Not Applicable		\$500/\$1,000	
Annual Deductible Employee only/Other than Employee Only	\$1,000*/ \$2,000*	\$2,000*/ \$4,000*	\$500*/ \$1,000*	\$1,000*/ \$2,000*	\$2,000**/ \$4,000**	\$4,000**/ \$8,000**
Out-of-Pocket Maximum Employee only/Other than Employee Only	\$4,000*/ \$8,000*	\$8,000*/ \$16,000*	\$3,000*/ \$6,000*	\$6,000*/ \$12,000*	\$4,000**/ \$7,150**	\$8,000**/ \$14,300**
Annual Physical Exam/Preventive Care	100% Covered	100% Covered				
Routine Office Visit (Primary Care Physician)	\$25	40% after deductible	\$20	30% after deductible	20% after deductible	40% after deductible
Specialist Office Visit	\$50	40% after deductible	\$40	30% after deductible	20% after deductible	40% after deductible
Emergency Room Visit	\$250	\$250	\$250	\$250	20% after deductible	40% after deductible
Inpatient Care/Services	20% after deductible	40% after deductible	15% after deductible	30% after deductible	20% after deductible	40% after deductible
Outpatient Care/Services	20% after deductible	40% after deductible	15% after deductible	30% after deductible	20% after deductible	40% after deductible

^{*}Deductibles and out-of-pocket maximums for the Core and Advantage Plans are for medical care only. These plans have a separate deductible and out-of-pocket maximum for prescription drug benefits.

^{**}The deductible and out-of-pocket maximum for the CDHP plan are "true family" deductibles. This means that any combination of medical expenses for family members can help you reach your deductible; your deductible could even be met by just one family member's expenses.

The CDHP and You

The Consumer Driven Health Plan (CDHP) has a lot in common with the PPO Core and Advantage plans, but there are some important differences. The CDHP is different, because it offers:

- Lower premiums in exchange for a higher deductible.
 This means you pay less from your paycheck and more at the time you need care, until you reach your deductible.
- Coinsurance, a different way to pay. Once you reach your deductible, you and the plan share the cost of in-network health care services and prescription drugs. You pay 20% of the cost, and the plan pays 80%.
- Up to \$500 (employee only coverage) or \$1,000 (employee + spouse, employee + children, family coverage) from the University in a tax-advantaged account.
- Flexibility. You can use the funds when you need them —
 now or in future years, and you have the freedom to take
 the funds with you wherever you go.
- A Health Savings Account (HSA). This is a triple
 tax-advantaged savings plan provided by the IRS, which
 lets you save money to pay for unexpected health care
 expenses. Unlike a Flexible Spending Account (FSA),
 the money is always yours and never goes away until you
 spend it on qualified medical expenses.

The CDHP might be different from what you're used to, but it's definitely worth considering this year when you're taking a fresh look at your benefits.

The Real Cost of Tobacco Use

Studies show that tobacco, whether it's in cigarettes or smokeless tobacco products, is harmful to your health. However, the effect of tobacco on your wallet is less well-known. Smoking is the root cause of chronic health care conditions like cancer, respiratory disorders and heart disease — diseases that can result in significant medical costs over your lifetime.

So, to reward employees who have decided not to use tobacco, we have a policy of lower medical premiums in exchange for healthy behavior. All you have to do is certify that you do not use tobacco products and will not use them while receiving lowered premiums. Then, you'll receive a \$50 discount on your health care premium each month.

Not tobacco free? If you enroll in, and complete, a tobacco cessation program, you'll begin receiving the \$50 discount and be refunded the extra money you spent on higher rates during the program.

1 Does your current plan meet your needs?

What have your health care expenses been like this year? If you and your family don't visit the doctor very often, you might be overinsured. Look at the benefits you're using now, and consider switching to a plan with lower monthly premiums. The CDHP, for example, has the lowest monthly premiums of our three plans, but higher deductibles.

2 What do next year's health care expenses look like?

If you have a big expense coming up in 2022, like a major surgery or a new baby, you might want to consider a higher level of coverage like the Advantage or Core plan.

? Pay more at the doctor's office or more in premiums?

Your monthly premiums will be higher for plans that offer lower cost at the time of service. This means your Advantage plan has the highest premiums, and the CDHP has the lowest. However, with higher premiums come lower costs at the doctor's office — think about how much you visit the doctor when deciding on your benefits this year.

Savings tip: If you elect the CDHP, take the money you save in premiums and contribute it to an HSA. You can use your HSA to help you pay for the higher deductible.

4 Do you want access to an HSA? An FSA?

Both the Health Savings Account (HSA) and the Health Care Flexible Spending Account (FSA) are special accounts designed to help you save on health care. The HSA has a big advantage over the FSA, as the money you deposit in an HSA never goes away until you spend it. It earns interest over time, and you keep the account even if you leave the University or retire! At the end of the year, you lose any funds left over in an FSA. However, you can only have an HSA if you enroll in the CDHP.

5 Have you considered your options?

Before making any big decisions, make sure you've considered all of your options. Are you covering your spouse and family? Does your spouse have coverage through his or her own employer? Have you looked at the CDHP and any spending or savings accounts you might want to use? An online comparison tool will be available within Benefit Focus, the online enrollment platform, to help you figure out which plan works best for you and your family. Sit down with your loved ones, and talk about which options work best for you, and then remember to enroll before your enrollment deadline.

YOUR EYEMED VISION PLAN



The University of Dayton offers you special, materials-only vision coverage through EyeMed. You and your covered dependents will automatically be enrolled in this plan, at no extra cost, when you enroll in a University of Dayton health plan. This plan, like your other benefits, will offer you the most coverage and least expensive options if you stay in-network for all services. Your coverage is highlighted in the chart below — for more details, visit the Benefits section of the HR website at www.udayton.edu/hr/benefits.

Don't forget — just because it's not a part of this vision plan doesn't mean you should skip your annual vision screenings! An eye exam each year for each covered member of your family is covered as preventive care under each of the three health plans.

Your Vision Plan Details

Your Vision Care Plan	In-Network	Out-of-Network
Frames	\$130 Allowance	Up to \$65
	20% off of any balance over \$130	
Lenses		
Single Vision	\$10	Up to \$25
Bifocal	\$10	Up to \$40
Trifocal	\$10	Up to \$55
Contacts (In lieu of frames and lenses)		
Conventional	\$130 Allowance; 15% off of balance	Up to \$104
Disposable	\$130 Allowance	Up to \$104
Medically Necessary	Covered at 100%	Up to \$200
Frequency	Once every 12 months	Once every 12 months
(Lenses, frames and contacts)		

YOUR HEARING DISCOUNT PROGRAM



The hearing discount program through Nation's Hearing provides all benefit-eligible employees and their family members with discounts on hearing instruments and free annual screenings. Please refer to the information page located in the Benefits section of the HR website at www.udayton.edu/hr/benefits for further information about the program. There is no need to enroll in this program. It is available to all benefit-eligible employees and graduate assistants even if not enrolled in the University's health care plan.



YOUR 2022 PRESCRIPTION DRUG BENEFITS

When you enroll in a University of Dayton medical plan, you also have access to help with your prescription drug expenses. CVS Caremark continue for 2022 as the University's pharmacy benefit manager. There is *no* requirement to use CVS retail pharmacies, and no changes to copayments are being made.

As an active employee enrolled in any of the University's health care plans, you will have a prescription drug ID card, in addition to your Anthem ID card. This CVS Caremark prescription drug ID card is for use when filling prescriptions only, and your Anthem ID card will be used for any other medical services.

The formulary list for the CVS Caremark program may be found on the HR website under the Open Enrollment section. The CVS Customer Care line is available at 888-202-1654 for any questions you may have about your coverage.

Your Prescription Drug Plan Details

	Core PPO Plan	Advantage PPO Plan	Consumer Driven Health Plan (CDHP)	
Prescription Drug Deductible	\$100	\$50		
Prescription Drug Out-of-Pocket Maximum	\$3,150	\$4,150	Included with your medical deductible	
RETAIL PHARMACY: Prescription Drug Cove	rage — You Pay			
Generic	\$10		20% after deductible	
Preferred Brand Formulary	\$40 after deductible		20% after deductible	
Nonpreferred Brand Non-Formulary	\$60 after deductible		20% after deductible	
Preventive	Same as above		\$10	
MAIL ORDER PHARMACY: Prescription Drug Coverage — You Pay 90-day Supply				
Generic	\$20		20% after deductible	
Preferred Brand Formulary	\$100 after deductible		20% after deductible	
Nonpreferred Brand Non-Formulary	\$150 after deductible		20% after deductible	
Preventive	Same as above \$20		\$20	

As the chart above shows, you can save money on prescriptions using the mail order feature, which is available under each plan.

Beginning January 1, 2022, maintenance medications will be required to be filled via the 90 day mail order or at a CVS pharmacy. For more information please see the CVS letter regarding maintenance medications that is included in the open enrollment materials.

The mail order program gives you a 90-day supply of maintenance prescription drugs, delivered to your home. Maintenance prescription drugs are those you take for more than 30 days for chronic conditions such as allergies, arthritis, diabetes, high blood pressure and certain psychiatric disorders.

The two biggest advantages to using mail order are:

- Convenience By using the mail order feature, you
 can get a 90-day supply of drugs without having to make
 monthly trips to the pharmacy.
- Cost savings Your cost for a 90-day supply of drugs is less than what you would pay if you went to a retail pharmacy every month for three months.

NOT DIFFERENT – JUST GENERIC

Always remember to ask your doctor for a prescription for **generic medication**. Generic drugs are chemically equivalent to brand-name drugs, and they have the exact same effect. However, generics generally cost 30% to 70% less. You aren't giving up any quality by going generic, you're just giving up the higher price tag. If your doctor prescribes a brand-name drug, ask if there is a generic equivalent available. Even if you forget to ask in the doctor's office, you can still ask the pharmacist to give you a generic equivalent.

Note: If you select a brand name medication when a generic is available, you will pay the generic copay plus the cost difference between the generic and the higher-priced brand-name drug.

YOUR SUPERIOR DENTAL CARE PLAN



The University of Dayton offers dental coverage through Superior Dental Care, a local dental plan company that coordinates with dentists in our area. Your coverage is highlighted in the chart below. The plan provides coverage for a wide range of services - from oral examinations and X-rays to extractions and orthodontia for children - and you will receive much lower rates for care if you stay in-network. To find out which dentists are in-network, visit www.superiordental.com.

If you do go out-of-network, you may apply for reimbursement from Superior Dental. However, they will only pay up to preset, reasonable and customary limits; you will be responsible for any remaining balance with your dental care provider.

There is no change in dental premiums for 2022.

Your Dental Plan Details

Your Superior Dental Care Plan	
Deductible	None
Preventive and Diagnostic Services (Not included in the annual maximum) (Exams, Cleaning, X-rays)	Covered at 100%
Basic Services (Fillings, Extractions, Root Canals, Periodontics)	Covered at 80%
Major Services (Crowns, Bridges, Dentures, Sealants, Occlusal Guards)	Covered at 50%
Annual Maximum	\$1,000 per person
Orthodontia Lifetime Maximum (For eligible dependents up to age 20)	\$1,000 per person

About Your Dental Plan

The following details of your Superior Dental Plan can help you understand the extensive benefits you receive as a part of your coverage:

- **No deductible** The plan pays first dollar on claims.
- **No claim forms** Just present your membership card at the time of service.
- No balance billing You are responsible only for your coinsurance based on a percentage of the dentist's charge.
- **Orthodontic maximum** Lifetime maximum is \$1,000 and is not offset by benefits paid by any previous plan.
- SMILERIDER™ is a supplemental cosmetic rider that provides a 15% discount for elective cosmetic services, like teeth whitening, veneers, bonding and porcelain facings. SMILERIDER™ dentists are identified by a (☺) in the directory of providers.
- **EyeMed Vision Care,** a discount plan separate from your vision coverage, is included with your dental plan. This program offers discounts on unlimited examinations and materials. Available at LensCrafters and Optique locations as well as many optician offices. For more information please call 877-226-1115.

DENTAL PLAN MONTHLY PREMIUMS

Employee Only	\$31.58
Family	\$91.47

COVERING YOUR SPOUSE

You may cover your spouse under a University of Dayton plan — but if he or she has coverage available through his or her own employer or former employer if they are retired, you will pay an extra cost each pay period based upon your salary tier. This helps keep costs down for both employees and the University, and helps maintain the stability and sustainability of your benefits in the long term.

YOUR 2022 HEALTH PLAN MONTHLY PREMIUMS*

You share the cost of your coverage with the University of Dayton through regular paycheck deductions, called premiums. The amount you pay depends on the plan you choose, your annual income and your level of coverage. Check below to see what each health plan will cost you each month.

Coverage Level	Salary < \$34,999 annually	Salary \$35,000- \$74,999 annually	Salary \$75,000– \$99,999 annually	Salary > \$100,000 annually	
Core Plan					
Employee Only	\$82	\$88	\$95	\$105	
Employee + Spouse	\$164	\$179	\$191	\$212	
Employee + Spouse with Spousal Surcharge	\$204	\$274	\$331	\$412	
Employee + Children	\$133	\$142	\$155	\$168	
Family	\$213	\$230	\$250	\$275	
Family with Spousal Surcharge	\$253	\$325	\$390	\$475	
	Advantage Plan				
Employee Only	\$283	\$308	\$333	\$360	
Employee + Spouse	\$776	\$844	\$913	\$986	
Employee + Spouse with Spousal Surcharge	\$816	\$939	\$1,053	\$1,186	
Employee + Children	\$622	\$676	\$730	\$789	
Family	\$824	\$896	\$965	\$1,044	
Family with Spousal Surcharge	\$864	\$991	\$1,105	\$1,244	
СДНР					
Employee Only	\$46	\$50	\$55	\$62	
Employee + Spouse	\$97	\$105	\$112	\$124	
Employee + Spouse with Spousal Surcharge	\$137	\$200	\$252	\$324	
Employee + Children	\$84	\$92	\$100	\$108	
Family	\$134	\$145	\$156	\$171	
Family with Spousal Surcharge	\$174	\$240	\$296	\$371	

^{*}In addition to the premiums listed above, there will be a \$50.00 per month charge for employees who use tobacco products. Premiums reflected are monthly and will be divided equally among the number of benefit deductions in a calendar year for your position.

HEALTH SAVINGS ACCOUNT (HSA)

A Health Savings Account (HSA) is a tax-advantaged savings account you can use for eligible health care expenses. It works much like a Flexible Spending Account (FSA), but with some important advantages. However, it's important to remember that you will only have access to an HSA if you join the CDHP plan. Check below for the details on this special account.

Your Health Savings Account Details



The University of Dayton contributes up to **\$500** (employee only coverage) or **\$1,000** (employee + spouse, employee + children, family coverage) to cover your eligible medical expenses — now, or in the future.



You can contribute, too, and use it like a savings account for your health care expenses.



You benefit from triple-tax savings:

- You make contributions tax-free.
- Your account balance can grow tax-free, and
- You can withdraw money tax-free to pay for eligible health care expenses.



Money in your account is always yours; there is no "use it or lose it" rule like there is with the health care Flexible Spending Account. Your money rolls over from year to year, so you can save for future expenses.



Your HSA is yours to keep; you can take it with you if you leave the University of Dayton, and you can even use it to pay for eligible health care expenses during retirement.



Funds deposited to your HSA earn interest and can be invested. Remember to save. and watch your investment grow over the years.

See below for the University of Dayton's 2022 HSA contribution amounts and the 2022 IRS annual contribution limits.

	Employee only	Employee + spouse, Employee + children/family coverage
University contributes	\$500	\$1,000
You can contribute up to	\$3,150	\$6,300
Maximum 2022 contribution	\$3,650	\$7,300
Catch-up contribution*	\$1,000	\$1,000

^{*}Eligible individuals who are age 55 and over are allowed to make additional "catch-up" contributions to their HSA.

Used responsibly, the HSA can be a powerful tool for your health care savings — and it's a great reason to take a fresh look at your CDHP option when enrolling in your health plan.

FLEXIBLE SPENDING ACCOUNTS (FSAs)

The University of Dayton offers three types of Flexible Spending Accounts*:

- Health Care FSA
- Limited Health Care FSA (only dental and vision expenses for those who have the CDHP plan)
- Dependent Care FSA

Use an FSA to set aside money to reimburse yourself for eligible expenses incurred during the year. And the best part is, the money you set aside is taken from your paycheck before you receive it and is completely tax-free!

How the FSAs Work

You enroll in the Health Care, Limited or Dependent Care FSA during Open Enrollment. At that time, you will estimate how much you'll spend on eligible expenses during the year, and decide how much of your salary you want to set aside. Here are the 2022 contributions as set by the IRS:

FSA	How Much You Can Contribute
Health care	\$2,850
Dependent Care	\$5,000 (\$2,500 if married and filing separate tax returns)

The amount you choose is divided by the number of pay periods in the rest of the year, and it is automatically deducted from your paycheck before taxes.

As you incur eligible expenses during the year, you pay for them out of your own pocket, then reimburse yourself with tax-free cash from your FSA.

Learn more about your FSA options, and keep track of your balances, by visiting www.mycafeteriaplan.com. At this site, you can set up direct deposit, find claims forms and always know how much you have to spend.

*Flexible Spending Accounts (FSAs) are not available to graduate assistants.

BEFORE YOU CHOOSE AN FSA...

As helpful as the FSA can be, you should be careful about how much you deposit. Once you choose how much you want to put into an FSA, you can't change it until your next enrollment period, and you can only use those funds to reimburse yourself for eligible expenses. At the end of each year, you'll lose any unspent funds in your FSA, so think hard about your contributions, or consider an HSA instead. In an HSA, there is no "use it or lose it" rule; your money keeps rolling over, year after year, gaining interest as it goes. You may only enroll in the HSA plan if you are enrolling in the CDHP. It is not available with the PPO plans.

But remember — the IRS says you can't have both a Health Care FSA and an HSA. You have to choose whether you'd like to participate in one or the other. However, you can have both an HSA and a Dependent Care FSA!

YOUR WELLNESS PROGRAM

The University of Dayton is as dedicated as ever to our mission of providing you with the health care tools you need to lead a healthier life. That's why, in 2022, you have the opportunity to turn your healthy behaviors into cash in your pocket.

First, confidential, free health evaluations are available to all benefit-eligible faculty, staff and graduate assistants. Not only will you receive a personalized biometric screening report through your participation in the health evaluation, but you'll also earn a \$120 annual discount on your premiums for health care in 2022.

Second, after completing the health evaluation, you can take advantage of the Health Activity Tracker. The Tracker is a service that allows you to earn points for engaging in wellness activities both at work and at home. When you've earned 120 points, you'll earn another \$120 annual discount on your health care premiums. Some activities which can earn you points are:

- Getting an annual physical.
- Getting a flu shot.
- Tracking your steps.

- Walking or running a 5K.
- Taking a weight management class.
- Health coaching through LifeWorks.

Register at portal.healthworksdata.com.

Other wellness opportunities will be offered throughout the year, like flu vaccinations each fall at no cost. Make sure you're on the lookout for ways to earn points and stay healthy!



ENROLLMENT AND ELIGIBILITY

WHEN TO ENROLL

You must make an election via Benefit Focus, the University's online enrollment platform, during the enrollment window below even if you want to waive health care or dental benefits for 2022. If you are newly eligible for benefits, you have 30 days to enroll.

CURRENTLY ELIGIBLE EMPLOYEES: Enroll October 26-November 8, 2021

NEWLY ELIGIBLE EMPLOYEES: Enroll within 30 days of benefits eligibility

Remember, enrollment is mandatory for every employee this year, whether you want to elect or waive your coverage from the University of Dayton.

HOW TO ENROLL IN YOUR BENEFITS

First, review all of your options before making any choices about your benefits. Then visit the online Benefit Focus platform located in the Self service section on the HR page in Porches.

If you have any questions about your coverage, please contact the Office of Human Resources at 937-229-2541. You may also contact the plan administrators directly by calling:

- Anthem at 844-437-0495.
- Superior Dental Care at 937-438-0283 or 800-762-3159.
- EyeMed Vision Care at 866-299-1358.
- CVS Customer Care at 888-202-1654.

LEGAL NOTICES

ABOUT THIS ENROLLMENT GUIDE

This enrollment guide includes only highlights of employee benefits available through the University of Dayton benefits program. If any inconsistency exists between this enrollment brochure and the plan documents, the provisions of the plan documents will prevail. While the University intends to continue offering the benefits program, the University reserves the right to change, amend or terminate the program or any of its plans at any time.

2FA Required for Open Enrollment

Benefit Focus will require you to log in with your UD username, password and two-factor authorization code. You must be enrolled in UD's two-factor authentication (2FA) system in order to log in to Benefit Focus. The 2FA system verifies that it's you logging in and prevents anyone else from fraudulently logging in to your account.

QUALIFIED CHANGES IN STATUS

Under normal circumstances, your only opportunity to make changes to your 2022 benefits is Open Enrollment, or within 30 days of your employment. However, the IRS allows you to change some benefit elections during the year if you experience a qualified change in status.

Qualified Changes in Status Include:

- Marriage
- Birth
- Loss of coverage
- Death
- Adoption
- Divorce

YOUR COBRA RIGHTS

Your COBRA rights are explained in your certificate of coverage, which is available on Anthem's website at www.anthem.com.

CREDITABLE COVERAGE

The University's healthcare plan options all meet the requirements to be considered creditable coverage by Medicare. For the official notice, please see online at www.udayton.edu/hr/benefits/legislative_req.php.



