The University of Illinois is the state’s leading and most comprehensive public university with campuses in Urbana-Champaign, Chicago, and Springfield. Other teaching and service facilities, including regional campuses in Peoria and Rockford, are located throughout the state. Online classes expand educational opportunities for residents of the State of Illinois and beyond.

The University serves the people of Illinois through a shared commitment to excellence in teaching, research, public service, and economic development. University of Illinois faculty, staff, and students share their knowledge, expertise, and the resources of the University with citizens in every corner of the state through more than 700 public service and outreach programs.

The University attracts many of the nation’s most talented students to hundreds of undergraduate, graduate, and professional programs – many of them ranked among the best in the United States. Faculty members are world leaders in research and discovery and contribute new knowledge and life-changing breakthroughs to a variety of fields including engineering, agriculture, law, veterinary medicine, the arts, business, liberal arts and sciences, and medicine and the health sciences.
UNIVERSITY PAYROLL AND BENEFITS (UPB)
Please contact UPB for help with any benefits questions and concerns. The UPB staff are ready to assist with benefits orientation, plan premiums and provisions, enrollment eligibility, required documentation, and claims processing. Benefits counselors are available at each campus to provide personalized assistance.

PERSONAL BENEFIT STATEMENT
You may view your benefits elections by selecting **Personal Benefit Statement** from the Benefits tab of NESSIE. [https://nessie.uhihr.uillinois.edu](https://nessie.uhihr.uillinois.edu)

Two Benefit Statements are available, a University of Illinois statement and a State of Illinois statement.

These online tools will be available to you once your first paycheck with benefits deductions has been processed.

Customer Service Hours (All Campuses)
Walk-in Hours: 10:00 a.m. to 3:00 p.m.
Call Center Hours: 9:00 a.m. to 4:00 p.m.

**UPB – Urbana**
Henry Administration Building
506 S. Wright St., Room 177, MC-318
Urbana, IL 61801-3627
Phone: 217-265-6363
Fax: 217-244-3135
Email: benefits@uillinois.edu

**UPB – Chicago**
809 S. Marshfield Ave 1st Floor, MC 547
Chicago, IL 60612-7205
Phone: 312-996-7200
Fax: 217-244-3135
Email: benefits@uillinois.edu

**UPB – Springfield**
Business Services Building, Room 85
One University Plaza
Springfield, IL 62703-5407
Phone: 217-206-7144
Fax: 217-244-3135
Email: benefits@uillinois.edu

This booklet is provided as a source of information only and does not constitute legal, tax, or other professional advice. If legal, tax, or professional advice is required, you should seek the services of a legal, tax, or financial professional. Benefits described in this booklet are subject to change, modification, or elimination without notice. Complete information on benefits plans may be obtained from UPB. If there are any differences between the information contained in this booklet and the official plan documents, the plan documents will govern. Receipt of this booklet is not a promise or guarantee of employment and/or coverage.

This booklet will be made available in an alternative format upon request. Please contact University Human Resources at uihr@uillinois.edu or 217-333-2590.

The University of Illinois is an equal opportunity/affirmative action institution.
WELCOME!

There are Benefits to belonging to the tradition of excellence at the University of Illinois. Benefits-eligible employees participate in a comprehensive set of State of Illinois and University of Illinois group benefit programs. A variety of enrollment options provides flexibility in both plan selection and level of coverage to allow you to maximize the value of your total compensation package.

This booklet serves as an overview to assist you in understanding the benefits available to you. Additional information can be found online in NESSIE, the employee self-service website, at https://nessie.uihr.uillinois.edu.

You can view premiums and rates for benefit plans at https://nessie.uihr.uillinois.edu/cf/benefits/.

Please attend a Benefits Overview Orientation session and a State Universities Retirement System (SURS) Plan Choice Webinar for an explanation of the benefit plans, which will help you evaluate your choices. As a new employee you should attend these sessions within the designated timeframe before making decisions regarding benefits. You are encouraged to contact UPB if you have any questions about your benefits.

<table>
<thead>
<tr>
<th>CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
</tr>
<tr>
<td>10</td>
</tr>
<tr>
<td>12</td>
</tr>
<tr>
<td>15</td>
</tr>
<tr>
<td>15</td>
</tr>
<tr>
<td>16</td>
</tr>
<tr>
<td>18</td>
</tr>
<tr>
<td>20</td>
</tr>
<tr>
<td>22</td>
</tr>
<tr>
<td>23</td>
</tr>
<tr>
<td>24</td>
</tr>
<tr>
<td>25</td>
</tr>
<tr>
<td>25</td>
</tr>
<tr>
<td>27</td>
</tr>
<tr>
<td>27</td>
</tr>
<tr>
<td>28</td>
</tr>
</tbody>
</table>
The University of Illinois total compensation package includes benefits made available by both the State of Illinois and the University of Illinois. Many of the benefits available to University employees are provided by the State Employees’ Group Insurance Act of 1971, which gives the State of Illinois Department of Central Management Services (CMS) the authority and responsibility to design, administer, negotiate, and/or contract for benefits plans. This includes the State Employees Group Insurance Program (SEGIP) for health, dental, vision, and life insurance.

ELIGIBILITY FOR STATE BENEFITS PLANS
You are eligible for State of Illinois benefits if you are on University payroll, eligible to participate in the State Universities Retirement System (SURS), and either:

- A regular employee with an appointment of 50% time or more, or
- A temporary employee with an appointment of 50% time or more for at least nine months, or
- An employee hired for at least 4.5 months (one semester) at 100% time.

You are eligible for participation in the State Universities Retirement System (SURS) if you work continuously for at least one academic term or four months, whichever is less, and your employment is not temporary, intermittent, or irregular.

You are not eligible to participate in SURS if you are:

- A student regularly attending classes at a college or university that participates in SURS and employed on a part-time, temporary basis,
- Employed under the Comprehensive Employment Training Act on or after July 1, 1979,
- Holding a J-1, J-2, F-1, or F-2 visa and have not established residency status, or
- Currently receiving a retirement annuity from SURS.

International Faculty and Staff
SURS and benefits eligibility for new employees with J-1, J-2, F-1 or F-2 visa is also dependent on tax residency status. A Tax Status Review appointment can be scheduled at http://www.obfs.uillinois.edu/training/registration/ under the heading, “Special Event Registration” or by contacting UPB. It is highly recommended that all foreign national employees register for a tax status appointment even if they have visa types other than those listed.
Part-Time Insurance Eligibility
You are defined as part-time insurance eligible if you are:

- A benefits-eligible employee who works 50-99% of a normal work period.
- A Faculty member with 100% appointment of equal to or greater than 4.5 months but less than 9 months.
- For appointments of less than 9 months, a formula determines your part-time employment percentage for purposes of insurance eligibility: length of employment, divided by 9 months, then multiplied by your full-time equivalent percentage.
- For example, if you are hired for 4.5 months at 100% time, you would be considered a 50% employee (4.5/9=.5x100 =50%) for SEGIP insurance.
- A flex year employee who works 6 months or greater but less than 12 months, if the layoff period is not a direct result of the academic year summer break.
- The formula used to determine a flex year employee’s appointment percentage for insurance purposes is the length of employment, divided by 12 months, multiplied by your full-time equivalent percentage (for example: 6/12=.5x100=50%).

With part-time insurance eligibility, you will be responsible for a portion of the State’s health and dental contribution in addition to the full-time employee and dependent health and dental premiums.

Please contact UPB if you have questions about your part-time or flex year status and insurance eligibility.

If you and your spouse/civil union partner are both employees of the University of Illinois or any other State of Illinois agency, then each spouse/civil union partner must be insured individually.

Dependent Eligibility
Your eligible dependents may also participate in the SEGIP insurance coverage. Eligible dependents include:

- Spouse (does not include ex-spouses, common-law spouses, or persons not legally married).
- Same-Sex Domestic Partner enrolled prior to June 1, 2011.
- Civil Union Partner enrolled on or after June 1, 2011.
- Children from birth to age 26 including natural, adopted, stepchild, child of a civil union partner, child for whom you have permanent legal guardianship or adjudicated child for whom a U.S. court decree has established financial responsibility for the child’s medical, dental or other healthcare.
- Certain children age 26 and older, including adult veterans and others. Visit the CMS website for a full description at http://www.illinois.gov/cms/benefits/StateEmployee/Pages/State-Dependent-Enrollment.aspx.
MANDATORY AND AUTOMATIC PARTICIPATION

If you are eligible for State benefits, certain plans are considered mandatory with only limited options for opting-out or waiving coverage. Additionally, some plans require you to make an active enrollment decision to avoid default enrollment.

- State Universities Retirement System (SURS) - Your retirement plan selection (Traditional, Portable, or Self-Managed) must be made within the first six months of benefits-eligible employment. If you do not voluntarily select a plan, you will be defaulted into the Traditional Benefit Plan. **Your plan selection, or default, is an irrevocable, one-time decision that cannot be changed at a later date.**

- State Basic Term Life Insurance - Enrollment is automatic. An amount equal to your annual salary is provided at no cost to you. Please note: Up to $50,000 of your life insurance is tax exempt. If the total value of basic term life insurance plus any optional insurance purchased exceeds $50,000, then the amount in excess of $50,000 is taxed as imputed income.

- Health Plans (including the Vision Plan) - Health insurance coverage under a State health plan, or from a source other than the State, is required for all benefits-eligible full-time (100%) employees. If you choose to opt out of the SEGIP coverage, then you must provide proof of non-State comprehensive major medical indemnity or managed care health coverage from a source other than SEGIP. Benefits-eligible part-time employees (50-99%), or those meeting part-time insurance eligibility as described previously must elect to either enroll in or waive health insurance coverage-see page 9. If an election to enroll, opt out, or waive coverage is not made within the first 10 calendar days of benefits eligibility, you will be automatically enrolled in the Quality Care Health Plan and dependent coverage will be waived.

- Dental Plan - The State of Illinois dental plan is available to both University employees and dependents who are eligible to receive benefits and who are enrolled in a State health insurance plan. Dental coverage is optional. However, you must actively choose to enroll or waive coverage. If an election to enroll, opt-out or waive coverage is not made within the first 10 calendar days of benefits eligibility, you will be automatically enrolled in the Quality Care Dental Plan and dependent coverage will be waived.

VOLUNTARY (OPTIONAL) BENEFITS

**State Programs:**
You may choose to participate in additional voluntary plans available through the State of Illinois.

- Accidental Death and Dismemberment (AD&D) Insurance
- Adoption Assistance Program
- Deferred Compensation 457 Plan
- Flexible Spending Accounts for Medical (MCAP) and Dependent Care (DCAP) expenses
- Smoking Cessation Program
- Term Life Insurance, including spouse and/or child coverage
- Weight Loss Program

**University of Illinois Programs:**
You may also choose to participate in a variety of voluntary plans offered by the University of Illinois.

- Accidental Death and Dismemberment (AD&D) Insurance
- Supplemental 403(b) Retirement Plan
- Supplemental Long Term Disability Plan

You are responsible for any premiums, costs, or contributions associated with voluntary plans in which you participate. Such costs are automatically deducted from your pay. Deductions may be on a pre-tax or post-tax basis, depending on the plan.
WHEN COVERAGE BECOMES EFFECTIVE
State of Illinois basic health, dental, vision, and life insurance coverage for you and your enrolled dependents takes effect on the date your benefits-eligible appointment begins provided you enroll within specific timeframes listed below. Other optional plans generally become effective on the first day of the month following enrollment.

WHEN TO ENROLL
Many of the State and University benefit plans have specific timeframes in which to enroll for plan selection and guaranteed coverage. It is important that you understand and meet these deadlines in order to have a full choice of plan coverage options.

Enrollment Required Within the First 10 CALENDAR DAYS of your Benefits Eligibility Date
- **State of Illinois Health Insurance** — If plan selection, opt-out election, or coverage waiver is not made within the first 10 calendar days of benefits eligibility, both full- and part-time employees are automatically enrolled in the Quality Care Health Plan, and dependent coverage is waived.
- **State of Illinois Vision Insurance** — Enrollment is automatic when you enroll in any of the health plans; however, if a health insurance plan selection is not made within the first 10 calendar days of benefits eligibility, dependent vision coverage is waived.
- **State of Illinois Dental Insurance** — If plan enrollment, opt-out election, or coverage waiver is not made within the first 10 calendar days of benefits eligibility, both full- and part-time employees are automatically enrolled in the Quality Care Dental Plan, and dependent coverage is waived. If you opt-out of dental only coverage, please note that you may not opt back into coverage until the next Benefit Choice period, even if coverage is lost through another dental plan.
- **State of Illinois Term Life Insurance (Optional)** — If not enrolled within the first 10 calendar days of benefits eligibility, evidence of good health is required to elect or increase your life insurance coverage and to add dependent coverage. Evidence of good health is required at any time if you elect coverage beyond four (4) times your salary.
Opt-out or waiver of State insurance coverage must be completed during the first 10 calendar days of benefits eligibility. Thereafter, you may only opt out or waive coverage during subsequent annual Benefit Choice periods or within 60 calendar days of an eligible Qualifying Event. Eligible full- and part-time employees who fail to either enroll in benefits coverage, opt-out, or waive coverage will be defaulted into the Quality Care Health and Dental Plans. Elections to opt-out or waive coverage can be made on the online UI New Hire Benefits Enrollment form.

The following options are available:

- **Full-time employees (100%)** may elect to opt out of the State of Illinois health, dental, and vision coverage with proof of other comprehensive major medical indemnity or managed care health coverage from a source other than SEGIP. Please note that you may elect to participate in only the health and vision plans and waive dental coverage if you wish. Once dental insurance is waived, enrollment is only permitted during subsequent Benefit Choice periods.

- **Part-time employees (50-99% or those meeting part-time insurance eligibility as described on page 6)** may elect to waive health, dental, and vision options. Proof of other insurance is not required if you are considered part-time.

**Enrollment Required Within the First 60 CALENDAR DAYS of Your Benefits Eligibility Date**

- **Flexible Spending Accounts (Optional)** — If you do not enroll within the first 60 calendar days of benefits eligibility, then you may only enroll during a subsequent annual Benefit Choice period or within 60 calendar days after an eligible Qualifying Event.

- **Voluntary Long Term Disability Insurance (Optional)** — If you do not enroll within the first 60 calendar days of benefits eligibility, evidence of good health is required to enroll thereafter.

**Enrollment Required Within the First 6 MONTHS of Your Benefits Eligibility Date**

- **State Universities Retirement System (SURS)** — If plan selection (Traditional, Portable, or Self-Managed) is not made within the first six months, you will be automatically enrolled in the Traditional Benefit Plan. **Both an active choice and a ‘default’ enrollment are irrevocable.** See page 19 for an important note about timely selection of the Self-Managed Plan.

**Enrollment That Can Occur at Any Time During Employment (Optional Plans)**

- State of Illinois Accidental Death and Dismemberment Insurance
- University of Illinois Accidental Death and Dismemberment Insurance
- State of Illinois Deferred Compensation 457 Plan
- University of Illinois Supplemental 403(b) Retirement Plan
STATE EMPLOYEES GROUP INSURANCE PROGRAM (SEGIP)

A choice of plans lets you select the coverage that best meets your needs and those of your family. The SEGIP health insurance plans include:

- Quality Care Health Plan (QCHP): A traditional indemnity plan with a nation-wide provider network.
- Managed Care Plans: Depending on your location, you may have a choice of Health Maintenance Organizations (HMOs) or Open Access Plans (OAPs).

As a new employee, you will select your health plan online using UI New Hire. Thereafter, you will use NESSIE to change health plans during the annual Benefit Choice period held in May, or when experiencing an eligible Qualifying Event.

Qualifying Event
A qualifying event is a change in your personal life that may impact your or your dependents’ eligibility for benefits. Examples may include a change in marital status, the birth or adoption of a child, or a change in a spouse’s employment status. You may only request a benefit plan change that is related to the Qualifying Event you have experienced. For example, you may add or drop dependent coverage if your marital status changes, but you may not switch between health plans. For a complete list and a detailed explanation, see NESSIE at https://nessie.uihr.uiuillinois.edu and select “Qualifying Event/State Plan Changes” from the Quick Links located in the upper right.

COST OF COVERAGE
The State of Illinois covers much of the cost of health (including vision) and dental coverage for most full-time employees. You will share in the cost of insurance coverage for yourself and your family. Premiums for health and dental insurance are automatically deducted on a pre-tax basis from your pay.

Your premium amount is based on your annual salary as of the previous April 1, or the starting salary of your benefits eligible position if newly employed after April 1. The premium you will pay for dependent coverage is determined by the health plan you select.

You can view premiums and rates for benefits plans at https://nessie.uihr.uiuillinois.edu/cf/benefits/.

NOTICE TO PART-TIME EMPLOYEES
In addition to your salary-based premium, you also pay a portion of the State cost for your own and any dependent health plan coverage in an amount proportionate to your appointment percentage. For example, if you hold a 75% appointment, you will pay the normal employee share of employee and dependent coverage, plus 25% of the State cost of employee and dependent coverage. The State will pay 75% of the State cost of employee and dependent coverage.

Part-time employees who are eligible for health and dental plan coverage and who do not make an election to either enroll in or waive their health and dental coverage within the first 10 calendar days of benefits eligibility will default into the Quality Care Health and Dental Plan for yourself only (if defaulted, your dependents are not enrolled). You are strongly cautioned to avoid this default.

You can view premiums and rates for benefits plans at https://nessie.uihr.uiuillinois.edu/cf/benefits/.
DEPENDENT COVERAGE
Your eligible family members may participate as dependents in the health (including vision) and dental plans. If you elect to insure dependents, they must be enrolled in the same health (including vision) and dental plans as you. Annual certification is required for some categories of dependents.

If you and your spouse/civil union partner are both insured employees, either or both of you may elect health coverage for dependents. However, the same dependent cannot be enrolled under both spouses for the same type of coverage (health, dental, or life).

If you and your spouse/civil union partner are both insured as employees of the University of Illinois or any other State of Illinois agency, each spouse/civil union partner must be insured individually.

Documentation of Dependent Eligibility
If you elect dependent coverage, you must provide supporting documentation of your dependent’s status (e.g. marriage certificate, birth certificate) in order for your dependent(s) to be added to or remain on the coverage. Documentation requirements can be found on NESSIE at https://nessie.uihr.uiillinois.edu/pdf/benefits/depdocs.pdf. An election to add a dependent will be voided if this documentation is not submitted within the enrollment timeframe. As a new employee, you must provide supporting documentation within fifteen (15) calendar days of the date you become benefits eligible.

The State of Illinois requires you to provide a valid Social Security Number (SSN) or a letter from the Social Security Office stating your dependent is not eligible for an SSN, for any dependents added to your coverage. SSNs must also be provided within fifteen (15) calendar days of the date you become benefits eligible. If the SSN has not yet been issued for your newborn or adopted child, the child will be added upon receipt of a birth certificate or adoption order. However, the child’s SSN must be provided within 90 days of the coverage request.

Enrolling a New Child
Enrollment of a newborn child in the health plan is guaranteed when the request is made within 60 calendar days of birth. However, enrolling a newborn always requires action on your part even if you currently have dependent coverage. To add a newborn to your plan, use NESSIE and submit a copy of the birth record (provided by hospital) or birth certificate to UPB: See NESSIE at https://nessie.uihr.uiillinois.edu and select “Qualifying Event/State Plan Changes” from the Quick Links located in the upper right, and then select “Add/Drop Employee and Dependent Health and Dental Coverage”. Please note that while notifying your insurance carrier, obtaining precertification for delivery, or filing claims for delivery expenses are important steps, they will not result in the enrollment of your newborn for health coverage. Remember to use NESSIE’s “Qualifying Event” or contact the UPB office if you need assistance to enroll your new child.

Questions? Email: benefits@uillinois.edu
https://nessie.uihr.uiillinois.edu
HEALTH INSURANCE PLAN OPTIONS

A Health Plan Comparison Chart, including premiums and rates, can be found online at https://nessie.uihr.uillinois.edu/cf/benefits/.

Quality Care Health Plan (QCHP)
QCHP is a traditional indemnity plan that offers a comprehensive range of benefits. If you are insured under the QCHP, you may seek treatment from any doctor or licensed practitioner, including chiropractors, at any hospital or treatment site. However, you receive the highest benefit when using in-network providers and facilities. Costs of using out-of-network providers may be significantly higher than in-network. You should always call for an estimate, even if you have had a similar service in the past.

The QCHP is comprised of three independent components: Medical, Prescription Drugs, and Behavioral Health Services. The coverage for prescription drugs and behavioral health services operates independently of the medical benefits. You do not need to satisfy the medical annual plan deductible in order to start receiving benefits for prescription drugs or behavioral health services. Please note, however, there is a separate deductible per plan participant per plan year for prescription drug coverage. The QCHP has an unlimited lifetime policy maximum for the Medical coverage component.

QCHP participants have access to the QCHP Physician and Hospital Network. An enhanced benefit is available by using a participating hospital or facility. See a list of participating providers at http://cigna.benefitnation.net/cignadol/default.asp?employer=3181456 or request a directory from CIGNA by calling 800-962-0051. View the “Summary of Benefits and Coverage (SBC)” at http://www.illinois.gov/cms/benefits/StateEmployee/Pages/SummaryofBenefitsandCoverage.aspx for additional information.

Some points to consider in making this choice:

- QCHP is typically the most costly plan; however, it offers the freedom to choose any doctor or treatment site, giving you the flexibility to change your choice of doctor or treatment site at any time.
- An annual plan year deductible and co-insurance apply to most Medical services.
- A mandatory precertification provision applies to hospital admissions (including maternity), in- or outpatient surgical procedures, and extended care facility admissions.
- You will receive the best cost value by using the QCHP Network Hospitals or QCHP Physician Network for inpatient stays, hospital outpatient services, prescription drugs, and mental health and substance abuse services.
- You, or your provider, are required to submit claim forms for payment of benefits. The claims administrator is Cigna.
- When using an out-of-network provider, it is recommended you obtain a preauthorization of benefits to ensure that medical services/stays will meet medical necessity criteria and be eligible for benefit coverage.
Health Maintenance Organization (HMO)
A Health Maintenance Organization (HMO) is a managed care plan that provides comprehensive medical care services. HMOs require that you choose a Primary Care Physician (PCP) from those participating in the HMO provider network. The PCP manages your health care treatment by requiring referrals for specialized services. All HMOs have a uniform basic benefit plan; however, some may offer additional benefits or may not include coverage for certain providers, such as chiropractors. All HMOs have unlimited lifetime policy maximums. View the “Summary of Benefits and Coverage (SBC)” at http://www.illinois.gov/cms/benefits/StateEmployee/Pages/SummaryofBenefitsandCoverage.aspx for additional information.

Some points to consider in making this choice:
- HMOs can provide economical healthcare, but are limited in access to providers within the plan network.
- The doctor you choose becomes your primary care physician and all medical care, including routine care, hospitalization, and referral to other health professionals must be coordinated under the direction of your primary care physician.
- Preventive and well-care services, such as routine physicals and pediatric care, are provided at no additional cost.
- Copayments apply to doctor’s office visits and prescriptions.
- Coverage for treatment of occupational, physical, and speech therapy for rehabilitation purposes may be limited.
- HMOs generally do not require you to submit claim forms, except in cases when emergency care takes place outside of your coverage area.

Open Access Plan (OAP)
An Open Access Plan (OAP) is a managed care plan that offers varying levels of benefits depending on the providers chosen by the member. The unique feature of the OAP is that it combines HMO-like benefits with the provider flexibility of the QCHP. The OAP is a three-tiered benefit plan and the specific provider, hospital, and services you choose determine which tier(s) of benefits you receive. At any given time you could be receiving care from multiple different providers, from multiple tiers, and therefore, receiving multiple different levels of benefits. All OAPs have unlimited lifetime policy maximums. View the “Summary of Benefits and Coverage (SBC)” at http://www.illinois.gov/cms/benefits/StateEmployee/Pages/SummaryofBenefitsandCoverage.aspx for additional information.

Some points to consider in making this choice:
- An OAP can offer some of the economic advantages of an HMO, but with more flexibility in access to providers, in or out-of-network.
- It is important to take an active role in coordinating your healthcare and understanding the level of benefits and costs that may differ by the Tier in which each provider (i.e., physician, hospital, laboratory, radiology) participates.
- Copayments apply to doctor’s office visits in Tier 1 and prescriptions.
- Deductibles apply to the Tier II and Tier III (out-of-network) benefits and to prescription coverage.
- Some services, such as preventive and well-baby, may be covered in-network only.
- When using an out-of-network provider, it is recommended you obtain a preauthorization of benefits to ensure that medical services/stays will meet medical necessity criteria and be eligible for benefit coverage.

HMO and OAP plans are available in many locations throughout Illinois; however, some plans may not be available in all areas. Refer to the State of Illinois Benefit Choice Options booklet for a list of plans by county.
WELLNESS OFFERINGS

Weight-Loss Program
You and your dependents who are covered under SEGIP may receive a rebate towards the cost of an approved weight-loss program. The maximum rebate is $200, once every three plan years. If you opt out or waive health coverage, then you are not eligible for this benefit, nor are your dependents.

To determine if a particular weight-loss program is an approved program, to submit documentation, and for answers to other questions about the program, contact CMS at 800-442-1300. For more information, see http://www.illinois.gov/cms/benefits/StateEmployee/Pages/Weight-LossBenefit.aspx.

Smoking Cessation Program
You and your dependents who are covered under SEGIP are eligible to receive up to a $200 rebate towards the cost of an approved smoking cessation program. One (1) rebate per year is available only upon completion of an approved smoking cessation program. Charges not eligible for rebate include hypnosis, acupuncture, prescription drug therapy, non-prescription drug therapy, and auricular therapy.

To determine if a particular smoking cessation program is an approved program, to submit documentation, and for answers to other questions about the program, contact CMS at 800-442-1300. For more information, see http://www.illinois.gov/cms/benefits/StateEmployee/Pages/SmokingCessation.aspx.
DENTAL PLAN

The Quality Care Dental Plan (QCDP) offers coverage for dental services regardless of which health plan you choose. You may go to the dentist of your choice and receive benefits for a range of services. You may pay less out-of-pocket when you receive services from a network dentist. There are two separate networks of dentists in addition to out-of-network providers: the Delta Dental PPO network and the Delta Dental Premier network. Network information can be found at http://soi.deltadentalil.com/SaveWithANetworkDentist.html.

Under the QCDP, you pay a premium for your own and any dependent coverage. The State also pays a portion of the premiums. Part-time employees pay a portion of the State cost in a percentage based on their percent of appointment, in addition to the employee premium.

You can view premiums and rates for benefits plans at https://nessie.uihr.uillinois.edu/cf/benefits/.

Important points to remember:
- You must be enrolled in one of the health insurance plans in order to participate in the dental plan.
- If plan selection, opt-out election, or coverage waiver is not made within the first 10 calendar days after your first day of benefits eligibility, then you default into the dental plan without dependent coverage.
- If you opt-out of dental only coverage, please note that you may not opt back into coverage until the next Benefit Choice period, even if coverage is lost through another dental plan.
- Plan pays a predetermined or scheduled amount toward each specific covered dental service, which is the maximum amount payable for that service. If your dentist charges more than the maximum allowed for a particular service, then you must pay the difference.
- Claims for benefits must be filed by you or your dentist with the claims administrator, Delta Dental of Illinois. The dental claim form can be found online at https://www.illinois.gov/cms/benefits/StateEmployee/Pages/StateDental.aspx.

VISION PLAN

The vision plan is automatically provided at no additional cost to you and your dependents who are enrolled in any of the SEGIP health plans. The vision plan is intended to encourage regular eye examinations and assist with vision care expenses when glasses or contact lenses are needed. Contact the plan for coverage details on eye exams, eyeglasses, and contact lenses.

Important points to remember:
- The highest benefit level is provided when services are received from in-network providers; however, limited benefits are available for services received from out-of-network providers.
- For information on participating in-network providers or for a schedule of covered services and copayment amounts, call the plan administrator, EyeMed Vision Care, at 866-723-0512 or visit their website at https://www.eyemedvisioncare.com/stil.
Flexible Spending Accounts (FSAs) provide the opportunity to pay certain Medical Care and Dependent Care expenses with before-tax dollars. Contributions are deducted from your paycheck and deposited into your FSA account before taxes are withheld, which lowers your taxable income.

The savings from participating in the FSA program vary greatly depending on your income, your contribution amount, the number of dependents you claim, adjustments or itemizations on your federal income taxes, and the total of your medical/dependent care expenses. The following chart provides a sample illustration of the potential savings associated with participation in an FSA.

<table>
<thead>
<tr>
<th></th>
<th>Not Participating in FSA</th>
<th>Participating in FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Gross Income</td>
<td>$35,000</td>
<td>$35,000</td>
</tr>
<tr>
<td>Contribution to MCAP/DCAP</td>
<td>$0</td>
<td>$1,500</td>
</tr>
<tr>
<td>Taxable Gross Income</td>
<td>$35,000</td>
<td>$33,500</td>
</tr>
<tr>
<td>Federal Income &amp; Social Security Taxes</td>
<td>$7,852</td>
<td>$7,362</td>
</tr>
<tr>
<td>Annual Net Income</td>
<td>$27,148</td>
<td>$26,138</td>
</tr>
<tr>
<td>Cost of Medical/Dependent Expenses</td>
<td>$1,500</td>
<td>$0</td>
</tr>
<tr>
<td>Spendable Income</td>
<td>$25,648</td>
<td>$26,138</td>
</tr>
<tr>
<td>Increased Spendable Income</td>
<td>$0</td>
<td>$490*</td>
</tr>
</tbody>
</table>

Example reproduced from the Connect Your Care Flexible Spending Accounts brochure. *Sample tax savings for a single taxpayer with no dependents; actual savings will vary based on your individual tax situation. Consult a tax professional for more information.

Enrollment

Your enrollment in this plan is based on a plan year of July 1 – June 30, and you must re-enroll each year during Benefit Choice to participate. Your enrollment cannot be changed or revoked during the plan year unless you experience an applicable Qualifying Event. This plan is administered by ConnectYourCare (CYC).

Eligibility

In order to be eligible to participate in either the Medical Care Assistance Plan (MCAP) or the Dependent Care Assistance Plan (DCAP), you must:

- Be a permanent employee with an appointment of 50% time or more, or
- Be an employee hired for at least 4.5 months (one semester) at 100% time, or
- Be a temporary employee with an appointment of 50% time or more for at least nine months; and
- Be receiving a paycheck from which deductions can be taken.

For participation in the MCAP, you must be eligible to participate in one of the State's health plans.

For participation in the DCAP, if you are married, your spouse must also be gainfully employed, a full-time student, disabled and incapable of self-care, or seeking employment and have income for the fiscal year. Special rules apply for divorced or separated parents. Custodial parents who meet certain criteria may be eligible to participate. Non-custodial parents are ineligible to participate.
MEDICAL CARE ASSISTANCE PLAN (MCAP)
You may use this plan to pay medical expenses that are not paid by your health, dental, or vision insurance such as deductibles, copayments, coinsurance, amounts exceeding the maximum benefit or the maximum allowable limits on health, dental, or vision plans, and non-covered expenses. Some over-the-counter items are eligible; however most require a written prescription to be eligible for reimbursement. On the ConnectYourCare (CYC) website at http://www.ConnectYourCare.com you can establish and access your account online and view additional information, including a list of eligible and ineligible expenses.

Contributions, Claim Submission Deadline, and Rollover
Your contributions may be made only by payroll deduction. The minimum contribution is $20 per month ($240 annually) and the maximum is $212.50 per month or $283.33 per month for University employees paid over a 9 month period ($2,550.00 annually). The maximum annual amount is $2,550.00.

When determining a deduction amount for MCAP, eligible out-of-pocket expenses must be incurred during the plan year (July 1 – June 30) and submitted for reimbursement by September 30 following the end of the plan year. MCAP participants who have a balance in their MCAP account after September 30, will have up to $500 of that account balance automatically rolled over to the next plan year’s MCAP account. This rollover amount will be available for use throughout the next plan year, which could result in a maximum MCAP account of $3,050 for the next plan year.

❚ Maximum rollover amount is $500.
❚ Rollover amount is available even if you do not re-enroll.
❚ Any rollover balance exceeding $500, after September 30, will be forfeited per IRS regulations.

DEPENDENT CARE ASSISTANCE PLAN (DCAP)
You may use this plan to cover the care costs for your eligible dependents while you are at work. On the CYC website at http://www.ConnectYourCare.com you can establish and access your account online and view additional information, including a list of eligible and ineligible expenses.

Contributions and Claim Submission Deadline
Your contributions may be made only by payroll deduction. The minimum contribution is $20 per month ($240 annually); the maximum contribution depends on your tax filing status as listed below.

<table>
<thead>
<tr>
<th>Contribution Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single and head of the household</td>
<td>$5,000</td>
</tr>
<tr>
<td>Married and filing separately</td>
<td>$2,500</td>
</tr>
<tr>
<td>Married and filing jointly</td>
<td>$5,000</td>
</tr>
<tr>
<td>Total combined family contribution if both spouses participate</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

❚ If you or your spouse earns less than $5,000 a year, your maximum is the lower of the two incomes.
❚ If your spouse is a full-time student or incapable of self-care, your maximum contribution is $3,000 per year for one dependent or $5,000 per year for two or more dependents.
❚ Since money set aside in your DCAP is always tax-free, you guarantee savings by paying for your eligible expenses through your IRS tax-favored account. Depending on the amount of income taxes you are required to pay, participation in DCAP may produce a greater tax benefit than claiming tax credits or exclusions alone. Remember, you cannot use the Internal Revenue Service (IRS) dependent care tax credit if you are married and filing separately. Further, any dependent care expenses reimbursed through your DCAP cannot be filed for the dependent care tax credit, and vice versa. To help you choose between the available taxable and tax-free benefits, or a combination of both, consult a professional tax advisor and/or the IRS for additional information.

Eligible DCAP out-of-pocket expenses must be incurred during the plan year (July 1 – June 30) and submitted for reimbursement by September 30 following the end of the plan year. There is no rollover provision for DCAP accounts. Any unused DCAP balance will be forfeited, according to IRS regulations.
STATE UNIVERSITIES RETIREMENT SYSTEM (SURS)

The State Universities Retirement System (SURS) offers three retirement plan choices:

- Traditional Benefit Package (Defined Benefit Plan)
- Portable Benefit Package (Defined Benefit Plan)
- Self-Managed Plan (Defined Contribution Plan)

It is very important to carefully review the SURS plan options and make an active decision about plan choice. Important considerations for plan selection include: Minimum Vesting, Normal Retirement Age, Earliest Retirement Age, Age Reduction, Final Rate of Earnings (FRE), FRE Limits, and more. A chart is available at http://surs.org/pdfs/Two_Tier.pdf to assist in evaluating these provisions. Additionally, you will want to consider differences in portability, death benefits, survivor benefits, and retiree health benefits in making your plan choice.

You will receive complete information about these choices directly from SURS. SURS will mail a detailed Choice Packet to your home address after receiving certification of your employment from the University. For additional information about your choices, contact SURS at 800-ASK-SURS (800-275-7877) or visit the SURS website, http://www.surs.org, and click on “New SURS Member” for resources to help you understand the three plan options. You may also view the “Plan Choice Video” at http://www.surs.org/plan-choice-video.

As a SURS participant, your contribution to the retirement plan is 8% of gross earnings. University police officers in the Traditional and Portable Benefit Plans contribute 9.5% unless a timely election to waive the right to make additional contributions is made. This contribution is automatically deducted from your paycheck, and is not subject to federal or state income taxes. Federal taxes will be withheld when you begin to withdraw funds following your retirement. Retirement distributions are not taxed by the State of Illinois if taken in accordance with plan provisions, at full retirement age, and while a legal resident of the State of Illinois.

Participation in SURS is required if you work continuously for at least one academic term or four months, whichever is less, and your employment is not temporary, intermittent, or irregular. You are not eligible to participate in SURS if: you are a student regularly attending classes at a college or university that participates in SURS and you are employed on a part-time, temporary basis; you were employed under the Comprehensive Employment Training Act on or after July 1, 1979; you hold a J-1, J-2, F-1, or F-2 visa and have not established residency status; or you are currently receiving a retirement annuity.

As a new employee, you have six (6) months from your initial date of SURS-eligible employment to make a lifetime, irrevocable selection of one of the three SURS plans. If you do not make this decision within six (6) months of your date of hire, you will be automatically enrolled in the Traditional Benefit Package. This “default” enrollment is also IRREVOCABLE for life.

If you are eligible for SURS, you are not covered by federal Social Security and no Social Security taxes are withheld from your earnings. However, if you were hired on or after April 1, 1986, your earnings are subject to withholding of federal Medicare tax, which amounts to 1.45% of Medicare-eligible salary.
TRADITIONAL AND PORTABLE (DEFINED BENEFIT) PLANS

Both Defined Benefit Plans provide you with a guaranteed payout when you retire, based on a formula set by the Plan. You bear no investment risk or responsibility. Many of the characteristics of the two Defined Benefit Plans are similar; however there are two important differences:

- **Portability.** The Portable Benefit Package allows for a larger refund than the Traditional Benefit Package if you leave SURS before retirement.
- **Survivor Benefits.** With the Portable Benefit Package, there is a cost at retirement if you want to provide survivor benefits to your survivor upon your death. With the Traditional Benefit Package, there is no additional cost, your survivor benefits are automatic.

<table>
<thead>
<tr>
<th>Allocation of 8.00%</th>
<th>Traditional</th>
<th>Portable</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.50%</td>
<td>Retirement</td>
<td>Retirement</td>
</tr>
<tr>
<td>0.50%</td>
<td>Automatic Annual Increase</td>
<td>Automatic Annual Increase</td>
</tr>
<tr>
<td>1.00%</td>
<td>Survivor Benefits</td>
<td>Portability</td>
</tr>
</tbody>
</table>

The State of Illinois also contributes an amount that is actuarially determined each year, and can vary from year to year. It is approximately 9.1% of earnings at the time of your retirement and is used to fund your retirement benefits, as well as to fund your disability benefit. (See page 22 for a description of the SURS Disability benefits.)

SELF-MANAGED (DEFINED CONTRIBUTION) PLAN

In the Self-Managed Plan (SMP), your retirement benefit is based on the amount of money that has been contributed to the Plan and the earnings on that money, over time. Unlike the Defined Benefit Plans, there is no guaranteed payout at retirement. You decide how to invest your contributions and earnings, using one or more of the investment funds the plan offers. If your investments do well, your account will grow. If your investments do poorly, your account will diminish. In other words, you bear all the investment risk.

Your investment company choices are Fidelity Investments and TIAA-CREF.

- Fidelity Investments: [http://www.fidelity.com/atwork](http://www.fidelity.com/atwork)
- TIAA-CREF: [http://www.tiaa-cref.org/illinois](http://www.tiaa-cref.org/illinois)

Your entire 8% contribution is allocated to your retirement account balance. The State also contributes an amount equal to 7.6% of your earnings to your account. Of that contribution, 7.3% is added to your retirement account balance, and the remaining 0.3% is used to fund your disability benefit. (See page 22 for a description of the SURS Disability benefits.)

As a new employee you have up to six (6) months to make your SURS plan choice. If you decide to elect the SMP, the State contributions do not begin until the first full payroll after your selection is made, so it is in your best interest to make this choice as soon as possible.
SURS AND SOCIAL SECURITY
The State of Illinois has elected to opt out of the Social Security system and instead cover eligible employees with membership in SURS as an alternative to Social Security coverage. As a result, the University does not contribute to Social Security on your behalf and no Social Security taxes are withheld from your earnings. You may be entitled to a benefit from Social Security if you, your current spouse, or former spouse, have previously worked for other employers who have contributed to the Social Security system. However, under the Social Security law, there are two ways your SURS pension may impact or reduce your Social Security benefit: 1) the Windfall Elimination Provision and 2) the Government Pension Offset Provision. Medicare benefits will not be impacted by these provisions.

Windfall Elimination Provision
Under the Windfall Elimination Provision, Social Security retirement or disability benefits are calculated using a modified formula when a person is also entitled to a pension from a job where no Social Security taxes were withheld. As a result, you may receive a lower Social Security benefit than if you were not entitled to a pension from this job. This provision reduces, but does not totally eliminate, your Social Security benefit.

Government Pension Offset Provision
Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled may be offset if you also receive a Federal, State, or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension. Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65.

For further information concerning your employment in a job not covered by Social Security, please visit the Social Security website, http://www.ssa.gov/, or call toll free 800-772-1213, or for the deaf or hard of hearing call the TTY number 800-325-0778, or contact your local Social Security office.

SUPPLEMENTAL RETIREMENT PLANS
In addition to your retirement account with SURS, you may elect to direct part of your pay to investments intended to build an individual retirement fund. You may choose to participate in either, or both, the University of Illinois Supplemental 403(b) Retirement Plan and the State of Illinois Deferred Compensation 457 Plan.

Participation in either of these plans is optional and does not reduce any University benefits that are based on full salary, such as retirement, life insurance, disability, or survivor benefits. Participation in either option is by payroll deduction only. The amount of income that can be contributed is subject to IRS limitations.

At retirement or termination of employment, you may defer a vacation payout into either the 403(b) or 457 plan. You must notify UPB at least 60 days prior to separating from the University in order to arrange deferral of vacation payout.
UNIVERSITY OF ILLINOIS SUPPLEMENTAL 403(b) RETIREMENT PLAN

The 403(b) Plan is a defined contribution plan intended to have tax-favored status under section 403(b) of the IRS Code. A 403(b) plan is similar to a 401(k) plan, but it is specifically designed for employees of public schools and certain tax-exempt organizations. The 403(b) Plan offers fixed and variable annuities, mutual funds, stocks, bonds, and money market funds. The Plan offers a number of funds with low share class fees. You have the option of contributing pre-tax (traditional) and/or post-tax (Roth) funds to the 403(b) Plan.

- Your traditional contributions are deducted from your pay on a pre-tax basis, which decreases your taxable income.
- Your Roth contributions are deducted from your pay on an after-tax basis. These funds and associated earnings can then be withdrawn tax-free at retirement provided the withdrawal meets certain requirements.
- In 2015, if you are under age 50, the maximum 403(b) contribution is $18,000. If you are age 50 or over, you may contribute up to an additional $6,000. (This maximum is a combined limit of both traditional and Roth contributions.)
- Your investment company choices are TIAA-CREF and Fidelity Investments.

For detailed instructions on enrolling, see NESSIE at https://nessie.uihr.uillinois.edu and select “403(b) Plan Enrollment” from the Quick Links located in the upper right.

STATE OF ILLINOIS DEFERRED COMPENSATION 457 PLAN

The Deferred Compensation Plan is a defined contribution plan intended to have tax-favored status under section 457(b) of the IRS Code. The plan is administered by CMS with T. Rowe Price as recordkeeper and plan service provider. Your contributions, together with any earnings, accumulate tax-deferred until you terminate service, die, or incur unforeseeable financial hardship. Once distributions begin, the distributed monies are fully taxable as ordinary income for federal tax purposes. Retirement distributions are not taxed by the State of Illinois if taken in accordance with plan provisions, at full retirement age, and while a legal resident of the State of Illinois.

The State of Illinois Board of Investments determines the range of investment choices for the plan. There are a number of investment options, including the T. Rowe Price Retirement Funds, which provide a single diversified portfolio that is actively managed to a specific retirement date.

- The minimum contribution is $10 per pay period or $20 per month, whichever is greater.
- In 2015, if you are under age 50, the maximum contribution is $18,000. If you are age 50 or over, you may contribute up to $24,000.

To obtain an enrollment form for the State Deferred Compensation Plan, see https://nessie.uihr.uillinois.edu/cf/benefits/index.cfm?Item_ID=4794. Return your completed form to UPB. You may also contact the CMS Deferred Compensation Office directly at 217-782-7006 or 800-442-1300. The first payroll contributions generally start two months after the form is received by CMS.
DISABILITY PLANS

SURS Disability Benefits
Disability benefits are provided through your participation in the State Universities Retirement System (SURS). The disability benefits are the same regardless of which of the three SURS retirement plan choices you select.
- Disability benefits may be claimed for an illness after you have accumulated two (2) years of service credit in SURS. This two (2) years requirement is waived if disability is due to an accident.
- Waiting Period: Benefits begin after 60 continuous calendar days of disability, or after salary or sick leave benefits end, whichever is later.
- Benefit Amount: As an eligible employee with an approved disability claim, you will receive the greater of 50% of your base salary on the date the disability begins or 50% of your average earnings for the 24 months immediately prior to the date your disability begins.
- Benefit Duration: Benefits are payable until the total benefits received equal 50% of your SURS earnings.

University Supplemental Long Term Disability (LTD) Insurance Plan
This optional LTD plan available through Prudential supplements the SURS benefits if you become disabled due to sickness or injury. To be eligible for enrollment in this plan, you must be a SURS participant. You pay the full cost of this plan. Monthly premiums are based on your age and your annual salary.

As a new benefits eligible employee, you will receive guaranteed coverage if you elect coverage within your first 60 days of employment. After 60 days, you may apply for coverage at any time by answering questions about your health. Prudential has the right to approve or deny any request for coverage. If a request is approved, coverage will begin on the date determined by the carrier. A pre-existing condition limitation is applicable during the first two (2) years of coverage.

Benefits under the plan are coordinated with any SURS disability payments so that a total benefit of up to 66.67% of base pre-disability earnings, up to a maximum of $12,000 per month, is paid.
- Plan pays 66.67% benefits in the first two years of employment when there is no SURS benefits payable for a disability due to illness.
- Plan pays 16.67% benefits once the 50% SURS disability benefit begins.
- Plan pays 66.67% benefits if disability continues after the SURS benefit is exhausted.
- Catastrophic Disability: plan pays 86.67% benefit (additional 20% of monthly earnings up to the $12,000 maximum) if you lose the ability to perform two activities of daily living or have severe cognitive impairment that requires substantial supervision.
- Critical Illness Benefit: plan pays 76.67% (additional 10% of monthly earnings up to a maximum of $1,000) if disability is caused by a covered critical illness.
- Survivor Benefit: plan pays a lump sum benefit, equal to six months of gross disability payments, to your beneficiary upon death.

To enroll in the University Supplemental LTD Plan, see NESSIE at https://nessie.uir.uiuc.edu/cf/benefits and select “LTD” from the menu on the left.
LIFE INSURANCE

Basic Term Life Coverage
As a benefits-eligible employee, you receive basic term life insurance through Minnesota Life in an amount equal to your annual salary, at no additional cost. Up to $50,000 of life insurance is tax exempt. If the total value of basic term life insurance plus any optional insurance purchased exceeds $50,000, then the amount in excess of $50,000 is taxed as imputed income, per IRS regulations.

Purchase Optional Life Coverage
During your 10-day enrollment period, life insurance enrollment is guaranteed for employee coverage up to four (4) times annual salary, and for purchasing spouse and child life insurance. With evidence of good health, you have the option to purchase additional life insurance of up to eight (8) times your annual salary with a maximum of $3,000,000 when combined with basic life coverage.

Spouse and child life insurance is also guaranteed for newly acquired dependents, if elected within the 60-day enrollment period after certain qualifying events, such as marriage, birth and adoption. Thereafter, evidence of good health is required to increase your life insurance and to add coverage for your spouse and/or children.

As a new hire, you will elect optional life insurance coverage through UI New Hire. Use NESSIE to change your life insurance enrollment during the annual Benefit Choice period or when experiencing an eligible Qualifying Event.

Travel Assistance Service
Your basic life insurance program includes travel assistance service at no additional cost. Pre-trip resources, emergency assistance, and transport services are available when traveling 100 or more miles away from home. Visit http://www.redpointresolutions.com/portal/securian/ for more information and the Basic Emergency Services terms of Service.

<table>
<thead>
<tr>
<th>Plan Component</th>
<th>State of Illinois Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Basic Life Insurance</strong></td>
<td></td>
</tr>
<tr>
<td>Employee basic provided by State of Illinois</td>
<td>100% of annual salary; up to $50,000 tax exempt</td>
</tr>
<tr>
<td><strong>Optional Life Insurance</strong></td>
<td></td>
</tr>
<tr>
<td>Employee optional term life</td>
<td>Up to 8 times annual salary, to a maximum of three million dollars in annual salary increments. Monthly rate per $1,000 based on age:</td>
</tr>
<tr>
<td>Under age 30</td>
<td>$.06</td>
</tr>
<tr>
<td>30-34</td>
<td>.08</td>
</tr>
<tr>
<td>35-44</td>
<td>.10</td>
</tr>
<tr>
<td>45-49</td>
<td>.16</td>
</tr>
<tr>
<td>50-54</td>
<td>.24</td>
</tr>
<tr>
<td>55-59</td>
<td>.44</td>
</tr>
<tr>
<td>60-64</td>
<td>.66</td>
</tr>
<tr>
<td>65-69</td>
<td>1.28</td>
</tr>
<tr>
<td>70 and above</td>
<td>2.06</td>
</tr>
<tr>
<td>Spouse life insurance</td>
<td>For $10,000 coverage: $6.00 per month.</td>
</tr>
<tr>
<td>Child life insurance</td>
<td>For $10,000, each child: $.70 per month</td>
</tr>
</tbody>
</table>
ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

State AD&D Insurance
You may purchase AD&D Insurance in either 1) an amount equal to your basic life (annual salary) or 2) the combined amount of your basic and employee optional life, subject to a maximum of five (5) times your basic life insurance amount or $3,000,000, whichever is less. The State AD&D plan does not have a limited enrollment period, and does not include coverage for a spouse and/or children.

University AD&D Insurance
The University also offers a separate AD&D insurance plan. You may purchase coverage for a spouse and/or children. Other benefits included in this plan are travel assistance services, medical evacuation, and repatriation of remains. Enrollment is guaranteed at any time during your University employment. As a new hire, enrollment is completed online through UI New Hire. Current employees may use NESSIE to enroll at any time.

Premiums and amounts of coverage for both State and University AD&D plans are provided below.

<table>
<thead>
<tr>
<th>Plan Component</th>
<th>State of Illinois Plan</th>
<th>University Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee AD&amp;D</td>
<td>1) Amount equal to basic life (annual salary) or 2) the combined amount of basic and employee optional life, subject to max 5x basic life or $3,000,000, whichever is less. $0.02 per $1,000 (monthly rate)</td>
<td>$25,000 to $300,000: $0.028 per $1,000 for employee; $0.043 per $1,000 for family coverage (monthly rate).</td>
</tr>
<tr>
<td>Spouse AD&amp;D</td>
<td>Not available</td>
<td>Coverage limited to 50% of employee amount if no children (40% if children).</td>
</tr>
<tr>
<td>Children AD&amp;D</td>
<td>Not available</td>
<td>Coverage limited to 10% of employee amount (15% if no spouse).</td>
</tr>
</tbody>
</table>

Discounts
Did you know there are discounts available through the Employee Assistance Program vendor, Magellan? Discounts offered include health and wellness, entertainment, restaurants, travel and more.

Go to [http://www.magellanassist.com/](http://www.magellanassist.com/) and click “Register or Enter as a Guest.” Enter 8666593848 and Continue. You may register OR scroll to the bottom and simply click “Enter as a Guest.” Select “LifeMart Discount Center” under Quick Links.
TUITION BENEFITS

Faculty, Staff, and Retirees
Faculty and Academic employees or retirees may receive a tuition waiver from any of the University of Illinois campuses (Urbana, Chicago, or Springfield).

Civil Service employees in trainee, apprentice, learner, provisional, or status appointments of 50% time or more may attend one of the other State Universities Civil Service System institutions in addition to the University of Illinois campuses.

The value of undergraduate level tuition waivers for employees is not taxable. However, the value of graduate-level educational benefits exceeding $5,250 in a calendar year is subject to employment taxes and must be reported as taxable wages on Form W-2. This taxation does not apply to qualified Teaching Assistants or Research Assistants.

Children of Employees
A 50% tuition waiver may be available for children of current employees for up to four years of undergraduate study at an Illinois state institution of higher education. For your children to be eligible, you, the parent (i.e., the employee), must meet the following criteria:

- You must have seven (7) years of University of Illinois (or other reciprocal State of Illinois university) service credit, not necessarily consecutive, in a SURS-eligible appointment.
- You must be currently employed in a SURS-eligible appointment (at least 50% for a minimum of nine months) as of the beginning of the academic term in which a waiver is claimed.

The value of undergraduate level tuition waivers for children of current employees is not taxable.

For more information and eligibility requirements on Tuition Benefits, please see NESSIE’s Life Events section at https://nessie.uhihr.uillinois.edu/cf/events/index.cfm and select “Education - Employee and Child Tuition Waivers”.

PAID TIME OFF (LEAVE) BENEFITS

The University of Illinois provides generous paid time off benefits, including time to observe holidays, enjoy vacation, or recuperate from illness. A few common paid leave benefits are described below. See NESSIE at https://nessie.uhihruillinois.edu/cf/leave/ for a summary of paid and unpaid leave that may be available to you. Certain leave provisions may vary based on your employment category, campus, or unit. Your campus/central HR office can assist with questions about time off and leave.

Holidays
You are generally eligible to receive nine (9) paid holidays each fiscal year and two additional floating holidays. The University recognizes the following holidays: New Year’s Day, Martin Luther King, Jr. Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas, and two other days as determined by the President of the University. Eligible employees also receive two floating holidays, which can be used at any time of the year, with the approval of your unit or department. Holiday schedules for each campus are posted in NESSIE.
Vacation
You are eligible for vacation leave for personal use if you are in a trainee, apprentice, learner, provisional, or status appointment, or if you are an academic employee on a 12-month appointment. The amount of vacation time for which you are eligible will depend on your type of position appointment.

<table>
<thead>
<tr>
<th>Civil Service Non-Exempt</th>
<th>Civil Service Exempt</th>
<th>Academic Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Years of Service Completed</strong></td>
<td><strong>Vacation Accrual</strong></td>
<td><strong>Years of Service Completed</strong></td>
</tr>
<tr>
<td><strong>At Least Not More Than</strong></td>
<td><strong>Rate/Hour</strong></td>
<td><strong>Leave Days</strong></td>
</tr>
<tr>
<td>0</td>
<td>3</td>
<td>0.0462</td>
</tr>
<tr>
<td>3</td>
<td>6</td>
<td>0.0577</td>
</tr>
<tr>
<td>6</td>
<td>9</td>
<td>0.0692</td>
</tr>
<tr>
<td>9</td>
<td>14</td>
<td>0.0808</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>0.0962</td>
</tr>
</tbody>
</table>

Sick Leave
Employees in trainee, apprentice, learner, provisional or status appointments; and academic employees with a 50% or greater appointment, are eligible for sick leave that may be used for illness of, injury to, or need to obtain medical or dental consultation for yourself, your spouse, children, parents, parents-in-law or members of the household. The amount of sick leave for which you are eligible will depend on your type of position appointment.

<table>
<thead>
<tr>
<th>Sick Leave Accrual</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Civil Service</strong></td>
</tr>
<tr>
<td>Accrued at a rate of .0462/hours for each hour (exclusive of overtime) in pay status.</td>
</tr>
<tr>
<td><strong>Academic Professional</strong></td>
</tr>
<tr>
<td>25 days, consisting of:</td>
</tr>
<tr>
<td>• 12 days that are cumulative, if unused</td>
</tr>
<tr>
<td>• 13 additional days in that appointment year, non-cumulative, are available if 12 are exhausted.</td>
</tr>
<tr>
<td>Amounts are prorated for appointments of less than a full appointment year. Part-time academic professionals receive the 12 and 13 days at a percentage of appointment.</td>
</tr>
</tbody>
</table>

Additional Time Off
Additional types of paid time off include parental leave, funeral/bereavement leave, blood/organ donor leave, jury duty, and military leave. You may also be eligible for additional unpaid time off, such as Family Medical Leave (FMLA) or Family Military Leave. In some instances, you may substitute accrued vacation or personal time for unpaid leaves. See NESSIE at [https://nessie.uhr.uillinois.edu/cf/leave/](https://nessie.uhr.uillinois.edu/cf/leave/) for further information on these and other leave types.
EMPLOYEE ASSISTANCE PROGRAMS

You may seek assistance through either the State of Illinois’ Employee Assistance Program or through the University’s Faculty/Staff Assistance Program. See NESSIE at https://nessie.uihr.uillinois.edu/cf/benefits/ and select “Employee Assistance” from the menu on the left for more information on campus resources.

University’s Faculty/Staff Assistance Program
The University’s Faculty/Staff Assistance Program is designed to provide personal, professional, and confidential assistance to all faculty, staff, academic professionals, and your household members, who are experiencing problems that interfere with your ability to work or with your well-being. The assistance program is available to help clarify issues, identify resources, and offer follow-up assistance as needed.

<table>
<thead>
<tr>
<th>Urbana Campus</th>
<th>Chicago Campus</th>
<th>Springfield Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>1011 W. Springfield Ave.</td>
<td>Employee Assistance Services</td>
<td>(See State EAP information below.)</td>
</tr>
<tr>
<td>Urbana, IL 61801</td>
<td>Clinical Services North (CSN), Room 365</td>
<td></td>
</tr>
<tr>
<td>217-244-5312</td>
<td>820 S. Wood St.</td>
<td></td>
</tr>
<tr>
<td>217-244-7739</td>
<td>Chicago, IL 60612</td>
<td></td>
</tr>
<tr>
<td>(24-hour mental health crisis line)</td>
<td>312-996-3588</td>
<td></td>
</tr>
</tbody>
</table>

State Employee Assistance Program (EAP)
The State Employee Assistance Program is a confidential assessment and referral service that provides problem identification, counseling, and referral services for employees and their families. All EAP care managers are professional, licensed clinicians. Trained customer service representatives and EAP care managers are available 24 hours a day, seven days a week.

<table>
<thead>
<tr>
<th>State Employee Assistance Program</th>
<th>State Personal Support Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Non-AFSCME Council 31 represented employees)</td>
<td>(AFSCME Council 31 represented employees)</td>
</tr>
<tr>
<td>Magellan Behavioral Health</td>
<td>Personal Support Program</td>
</tr>
<tr>
<td>866-659-3848</td>
<td>AFSCME Council 31</td>
</tr>
<tr>
<td>800-456-4006 (TDD/TTY)</td>
<td>800-647-8776</td>
</tr>
<tr>
<td></td>
<td>800-526-0844 (TDD/TTY)</td>
</tr>
</tbody>
</table>

ADOPTION ASSISTANCE PROGRAM

Assistance is available for adding to your family through adoption. All regular full-time employees and part-time employees with a 50% or greater appointment are eligible for the State of Illinois Adoption Assistance program. See NESSIE at https://nessie.uihr.uillinois.edu/cf/benefits/ and select “Adoption” from the menu on the left for more information.

For questions about the Adoption Assistance benefits or enrolling the adopted child in group insurance, contact CMS at 800-442-1300. For questions about adoption in general, please contact the Adoption Information Center of Illinois at 800-572-2390.
# BENEFITS PLAN DIRECTORY

## MANAGED CARE PLANS

<table>
<thead>
<tr>
<th>Health Plan Administrators</th>
<th>Toll-Free Telephone Number</th>
<th>TDD/TTY Number</th>
<th>Website Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coventry Health Care HMO</td>
<td>800-431-1211</td>
<td>217-366-5551</td>
<td><a href="http://www.chcillinois.com">http://www.chcillinois.com</a></td>
</tr>
<tr>
<td>Coventry Health Care OAP</td>
<td>800-431-1211</td>
<td>217-366-5551</td>
<td><a href="http://www.chcillinois.com">http://www.chcillinois.com</a></td>
</tr>
<tr>
<td>Health Alliance HMO</td>
<td>800-851-3379</td>
<td>800-526-0844</td>
<td><a href="https://healthalliance.org/stateofillinois">https://healthalliance.org/stateofillinois</a></td>
</tr>
<tr>
<td>HealthLink OAP</td>
<td>800-624-2356</td>
<td>800-624-2356 ext. 6280</td>
<td><a href="https://www.healthlink.com/illinois_index.asp">https://www.healthlink.com/illinois_index.asp</a></td>
</tr>
</tbody>
</table>

## QUALITY CARE HEALTH PLAN

<table>
<thead>
<tr>
<th>Plan Administrator</th>
<th>Toll-Free Telephone Number</th>
<th>TDD/TTY Number</th>
<th>Website Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Care Health Plan (Cigna)</td>
<td>800-962-0051</td>
<td>800-526-0844</td>
<td><a href="http://www.cigna.com/stateofil">http://www.cigna.com/stateofil</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Plan Component</th>
<th>Contact For</th>
<th>Administrator’s Name and Address</th>
<th>Customer Service Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>QCHP Medical Plan Administrator</td>
<td>Medical service information, network providers, claim forms, ID cards, claim filing/resolution and predetermination of benefits.</td>
<td>Cigna&lt;br&gt;QCHP Group #3181456&lt;br&gt;Cigna HealthCare&lt;br&gt;P.O. Box 182223&lt;br&gt;Chattanooga, TN 37422-7223</td>
<td>800-962-0051 (nationwide)&lt;br&gt;800-526-0844 (TDD/TTY)&lt;br&gt;<a href="http://www.cigna.com/stateofil">http://www.cigna.com/stateofil</a></td>
</tr>
<tr>
<td>QCHP Notification and Medical Case Management Administrator</td>
<td>Notification prior to hospital services. Monetary noncompliance penalty applies. (out-of-network only)</td>
<td>Cigna&lt;br&gt;QCHP Group #3181456</td>
<td>800-962-0051 (nationwide)&lt;br&gt;800-526-0844 (TDD/TTY)</td>
</tr>
<tr>
<td>QCHP Behavioral Health Administrator</td>
<td>Notification, authorization, claim forms and claim filing/resolution for behavioral health services.</td>
<td>Magellan Behavioral Health&lt;br&gt;QCHP Group # 3181456&lt;br&gt;P.O. Box 2216&lt;br&gt;Maryland Heights, MO 63043</td>
<td>800-513-2611 (nationwide)&lt;br&gt;800-526-0844 (TDD/TTY)&lt;br&gt;<a href="http://www.MagellanHealth.com">http://www.MagellanHealth.com</a></td>
</tr>
</tbody>
</table>

## PRESCRIPTION DRUG ADMINISTRATORS

Information on prescription drug coverage, pharmacy network, mail order, specialty pharmacy, ID cards, claim filing.

<table>
<thead>
<tr>
<th>Prescription Drug Administrators</th>
<th>Name and Address</th>
<th>Customer Service Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>QCHP (Group Number: 1400SD3)</td>
<td>CVS/caremark&lt;br&gt;&lt;b&gt;Mail Order Prescriptions:&lt;/b&gt;&lt;br&gt;CVS/caremark&lt;br&gt;P.O. Box 94467&lt;br&gt;Palatine, IL 60094-4467</td>
<td>877-232-8128 (nationwide)</td>
</tr>
<tr>
<td>Coventry Health Care OAP (Group Number: 1400SCH)</td>
<td>Contact your HMO Plan Administrator</td>
<td>800-231-4403 (TDD/TTY)&lt;br&gt;<a href="http://www.caremark.com">http://www.caremark.com</a></td>
</tr>
<tr>
<td>HealthLink OAP (Group Number: 1400SCF)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BlueAdvantage HMO&lt;br&gt;Coventry Health Care HMO&lt;br&gt;Health Alliance HMO&lt;br&gt;HMO Illinois</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan Component</td>
<td>Administrator’s Name and Address</td>
<td>Customer Service Phone Numbers</td>
</tr>
<tr>
<td>----------------</td>
<td>--------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td></td>
<td>P.O. Box 8504, Mason, OH 45040-7111</td>
<td></td>
</tr>
<tr>
<td>Quality Care Dental Plan (QCDP) Administrator</td>
<td>Delta Dental of Illinois Group Number 20240 P.O. Box 5402 Lisle, IL 60532</td>
<td>800-323-1743, 800-526-0844 (TTY)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flexible Spending Accounts (FSA)</td>
<td>ConnectYourCare P.O. Box 622317 Orlando, FL 32862-2317</td>
<td>888-469-3363, 800-526-0844 (TTY), 866-892-8063 (Fax)</td>
</tr>
<tr>
<td>Health/Dental Plans, Medicare COB Unit, FSA and CSP Unit, Premium Collection Unit, Life Insurance, Adoption Assistance, Smoking Cessation, and Weight Loss</td>
<td>CMS Group Insurance Division 801 S. 7th Street P.O. Box 19208 Springfield, IL 62794-9208</td>
<td>800-442-1300, 800-526-0844 (TTY)</td>
</tr>
<tr>
<td>University AD&amp;D Insurance</td>
<td>The Hartford Contact UPB,</td>
<td></td>
</tr>
<tr>
<td>Voluntary Supplemental Long Term Disability Insurance</td>
<td>Prudential Insurance Company of America 751 Broad Street Newark, NJ 07102</td>
<td>800-842-1718</td>
</tr>
<tr>
<td>State Employee Assistance Program (EAP)</td>
<td>Magellan Behavioral Health For Non-AFSCME 31 represented employees</td>
<td>866-659-3848 (nationwide), 800-456-4006 (TTY)</td>
</tr>
<tr>
<td>Personal Support Program (PSP-AFSCME EAP)</td>
<td>AFSCME Council 31 For AFSCME represented employees</td>
<td>800-647-8776 (statewide), 800-526-0844 (TTY)</td>
</tr>
<tr>
<td>University Employee Assistance Program</td>
<td>See page 27 for more information.</td>
<td></td>
</tr>
<tr>
<td>Plan Component</td>
<td>Contact For</td>
<td>Administrator’s Name and Address</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>--------------------------------------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>State Universities Retirement System (SURS)</td>
<td>Questions about the Traditional, Portable, or Self-Managed plans.</td>
<td><strong>SURS</strong>&lt;br&gt;P. O. Box 2710&lt;br&gt;Champaign, IL 61825-2710</td>
</tr>
<tr>
<td>Deferred Compensation Plan Administrator (457(b) Plan)</td>
<td>General questions and to obtain enrollment materials.</td>
<td><strong>CMS Deferred Compensation Division</strong>&lt;br&gt;801 S. 7th Street&lt;br&gt;PO Box 19208&lt;br&gt;Springfield, IL 62794-9208</td>
</tr>
<tr>
<td>Deferred Compensation Plan Recordkeeper (457(b) Plan)</td>
<td>Account balances, information on fund performance and additional literature.</td>
<td><strong>T. Rowe Price</strong>&lt;br&gt;P. O. Box 17215&lt;br&gt;Baltimore, MD 21297-1215</td>
</tr>
<tr>
<td>403(b) Supplemental Retirement Plan</td>
<td>General information.</td>
<td>Contact UPB Office</td>
</tr>
<tr>
<td>Investment company choices for both the 403(b) Plan and the SURS Self-Managed Plan option</td>
<td>Investment company information, fund prospectuses, account enrollment.</td>
<td><strong>Fidelity Investments</strong>&lt;br&gt;P. O. Box 770002&lt;br&gt;Cincinnati, OH 45277-0090</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>TIAA-CREF</strong>&lt;br&gt;P. O. Box 1259&lt;br&gt;Charlotte, NC 28201</td>
</tr>
</tbody>
</table>

*http://www.illinois.gov/cms/benefits/Deferred/Pages/DeferredCompensation.aspx*
University of Illinois
Urbana-Champaign • Chicago • Springfield