

# OUR EMPLOYEES MATTER

AND

# THEIR HEALTH DOES TOO

That's why the University of Idaho offers comprehensive benefits that help employees and their covered dependents take charge of their physical, emotional and financial health.

- Pay \$0 for preventive care
- Some preventive drugs covered in full under the HDHP
- U of I contributes to retirement benefits
- Access to no-cost counseling benefits
- U of I pays the **full cost** of basic life and disability insurance

#### **MEDICAL AND PRESCRIPTION DRUG BENEFITS**

The University of Idaho offers two medical plans. Both plans provide preventive care at no cost and comprehensive coverage for non-preventive care. Whether you choose the High Deductible Health Plan or Standard PPO, you have access to prescription drug coverage for generic and brand name medications.

#### Medical

**Blue Cross of Idaho** bcidaho.com

|                           | High Deductible<br>Health Plan (HDHP)             | Standard PPO  |   |  |  |
|---------------------------|---|---|---|--|--|
|                           | In- or Out-of-Network                             | In-Network  | Out-of-Network                                    |  |  |
| Annual deductible         | Single: \$1,900<br>Family: \$3,800                | Single: \$800<br>Family: \$1,600  | \$1,300 per individual                            |  |  |
| Annual cost-share maximum | Single: \$3,100<br>Family: \$6,200                | Single: \$3,650<br>Family: \$7,300  | \$5,300 per individual                            |  |  |
| Preventive care           | You pay \$0                                       | You pay \$0   | You pay full cost                                 |  |  |
| Office visits             | You pay 30% of maximum allowance after deductible | You pay \$35 copay for each office visit, not subject to or applied to deductible | You pay 35% of maximum allowance after deductible |  |  |
| Emergency services        | You pay 30% of maximum allowance after deductible | You pay 20% of maximum allowar and \$100 copay                                    | nce after deductible                              |  |  |

#### **Prescription Drugs**

**CVS Caremark** <u>caremark.com</u>

|                           | High Deductible Health Plan (HDHP)   | Standard PPO  Retail / Mail Order   |  |  |
|---------------------------|--|---|--|--|
|                           | Retail / Mail Order  |   |  |  |
| Annual deductible         | Combined with medical deductible   | Single: \$125; Family: \$250  |  |  |
| Annual cost-share maximum | Combined with medical cost-share maximum   | Single: \$4,625; Family: \$9,250  |  |  |
|                           | Up to a 90-Day Supply  | 1-Month Supply 3-Month Supply   |  |  |
| Generic                   | You pay 100% of drug cost until you<br>meet the deductible, then you pay 30%<br>of maximum allowance | You pay 25% (\$12 minimum; \$25 maximum)  You pay 25% (\$36 minimum; \$75 maximum)    |  |  |
| Preferred brand name      | Certain preventive drugs are covered at no cost to you   | You pay 25% (\$25 minimum; \$75 maximum)  You pay 25% (\$75 minimum; \$225 maximum)   |  |  |
| Non-preferred brand name  |  | You pay 25% (\$40 minimum; \$100 maximum)  You pay 25% (\$120 minimum; \$300 maximum) |  |  |

#### **SPENDING ACCOUNTS**

#### HealthEquity healthequity.com

Use pretax money to pay for eligible health care and dependent care expenses.

| Health Savings Account (HSA)  Employee only coverage Family coverage | Your 2025 Maximum Contribution* \$3,800 \$7,550  University Maximum Matching Contribution \$500 \$1,000  Maximum Contribution Amount (You + University) \$4,300 \$8,550 |  |  |  |  |
|--|---|--|--|--|--|
| Health Care Flexible Spending Account (Health Care FSA)              | If you enroll in the Standard PPO or waive coverage, you can contribute tax-free dollars, up to \$3,300 annually (no matching university contribution)                  |  |  |  |  |
| Dependent Care Flexible Spending Account (Dependent Care FSA)        | You can contribute tax-free dollars, up to \$5,000 annually (or \$2,500 if you and your spouse file separate tax returns)   |  |  |  |  |

 $<sup>^{\</sup>star}$  If you're age 55 or older (by 12/31/25), you can make an additional \$1,000 contribution.

#### **DENTAL BENEFITS**

Delta Dental deltadentalid.com | Willamette Dental willamettedental.com

With three dental plan choices, select the best dental coverage for you and your family.

|                        | Delta Dental<br>Standard                          | Delta Dental<br>Plus  | Willamette Dental*                       |
|------------------------|---|---|--|
| Annual deductible      | Individual: \$25<br>Family: \$75                  | Individual: \$50<br>Family: \$150                           | None                                     |
| Annual maximum benefit | \$1,000   | \$2,000   | None                                     |
| Preventive care        | You pay \$0                                       | You pay \$0   | \$20 copay                               |
| Minor restorative      | You pay 20% of maximum allowance after deductible | You pay 20% of maximum allowance after deductible           | Copays vary by service                   |
| Major restorative      | You pay 50% of maximum allowance after deductible | You pay 45% of maximum allowance after deductible           |  |
| Orthodontia            | You pay full cost                                 | Plan pays 50%, up to \$1,500<br>lifetime maximum per person | You pay \$1,500 plus office visit copays |

<sup>\*</sup> Willamette Dental is only available in certain areas.



#### **VISION BENEFITS**

#### VSP vsp.com

When receiving eye care, you can visit the provider of your choice, but you maximize available benefits when you use VSP providers.

|   | VSP Provider   | Non-VSP Provider   |  |  |
|---|--|--|--|--|
| Annual eye exam   | You pay \$10 deductible,<br>then plan pays 100%  | You pay \$10 deductible, then plan reimburses up to \$50   |  |  |
| Eyeglass lenses<br>(once every 12 months)   | You pay \$25 deductible,<br>then plan pays 100%  | You pay \$25 deductible, then plan reimburses: Single vision: \$50 Trifocal: \$100 Bifocal: \$75 |  |  |
| Eyeglass frames<br>(once every two years)   | You pay \$25 deductible,<br>then plan pays up to \$175   | You pay \$25 deductible, then plan reimburses up to \$70   |  |  |
| Lens enhancements  • Standard progressive lenses  • Premium progressive lenses  • Custom progressive lenses | Covered in full<br>You pay \$80-\$90<br>You pay \$120-\$160  | Not covered  |  |  |
| Contact lenses in lieu of glasses, every calendar year  | Lenses: Plan pays up to \$175 for contacts and fitting exam Fittings and evaluations: You pay up to a \$60 deductible, then plan pays 100% | Lenses: Plan reimburses up to \$105 Fittings and evaluations: Not covered                        |  |  |

#### **FULL TIME\* EMPLOYEE CONTRIBUTIONS**

The chart below shows the 2025 biweekly, pretax contributions for health coverage.

|                        | Medical<br>Prescrip | and<br>otion Drugs                    | Dental                   |                      | Vision     |                              |
|------------------------|---------------------|---------------------------------------|--------------------------|----------------------|------------|------------------------------|
|                        | Standard<br>PPO     | High Deductible<br>Health Plan (HDHP) | Delta Dental<br>Standard | Delta Dental<br>Plus | Willamette | Vision Service<br>Plan (VSP) |
| Employee Only          | \$93.34             | \$49.25                               | \$0.00                   | \$3.72               | \$9.32     | \$0.00                       |
| Employee +<br>Spouse   | \$195.95            | \$103.39                              | \$0.00                   | \$8.32               | \$19.26    | \$0.00                       |
| Employee +<br>Child    | \$130.65            | \$68.93                               | \$0.00                   | \$7.43               | \$18.22    | \$0.00                       |
| Employee +<br>Children | \$197.82            | \$104.37                              | \$0.00                   | \$14.12              | \$34.71    | \$0.00                       |
| Employee +<br>Family   | \$263.13            | \$138.82                              | \$0.00                   | \$15.01              | \$37.12    | \$0.00                       |

 $<sup>^{\</sup>star}$  Employees working 35-40 hours per week.

# LIFE INSURANCE BENEFITS

#### The Standard standard.com

Life insurance provides financial protection in the event of your or your dependent's death.

#### **Basic Life**

 Provided at no cost: 1x your base annual salary, up to \$500,000 maximum

#### **Optional Life\***

 Buy-Up Option: Up to 4x your base annual salary, up to \$1,000,000 maximum

#### **Dependent Life\***

- Buy-Up Option: spouse coverage in increments between \$10,000 and \$250,000
- Buy-Up Option: eligible dependent coverage for \$5,000, \$10,000 and \$25,000

## Accidental Death and Dismemberment

 Employee coverage is available for 1x to 5x your base annual salary, up to a \$1,000,000 maximum benefit. Coverage for family members is a percentage of your benefit.

# DISABILITY INSURANCE

#### The Standard standard.com

Disability insurance provides short-term and long-term protection in the event you cannot work because of injury or sickness, or in the event of your death.

#### **Short-Term Disability**

- Provided at no cost: 50% of your pay, up to \$500 per week
- Buy-Up Option 1: 60% of your pay, up to \$700 per week
- Buy-Up Option 2: 66.67% of your pay, up to \$1,250 per week

#### **Long-Term Disability**

- Provided at no cost: 50% of your pay, up to \$2,000 per month
- Buy-Up Option 1: 60% of your pay, up to \$3,000 per month
- Buy-Up Option 2: 66.67% of your pay, up to \$5,000 per month



<sup>\*</sup> Depending on the coverage you elect, evidence of insurability may be required.

# PHYSICAL WELLNESS BENEFITS

These benefits are available at no cost to you and your dependents when you enroll in a university medical plan.

#### **Diabetes Prevention Program**

Blue Cross of Idaho gosolera.com/uidaho

Online or in-person lifestyle coaching programs can help you significantly reduce your risk of developing diabetes.

#### **Hinge Health**

hingehealth.com/universityofidaho

Get physical therapy and health coaching via telehealth to manage chronic and acute musculoskeletal conditions from the comfort of home.

#### **Wondr Health**

wondrhealth.com/uofi

Reduce stress, sleep better, manage weight and increase confidence with this digital, science-backed behavior-change program.

#### Blue Cross of Idaho Member Support

members.bcidaho.com

Through Blue Cross of Idaho, access these additional benefits:

- Care management
- · Condition support for chronic conditions
- Pregnancy support
- Sharecare digital wellbeing tool
- Discounts on health and wellness products and services

# COUNSELING AND THERAPY BENEFITS

When it comes to your emotional health, the university offers you in-person and virtual care options. With 24/7 resources available, you can access benefits when it's convenient for you.

#### **CredibleMind**

uidaho.crediblemind.com

You and your dependents have 24/7 access to CredibleMind, a free, confidential and valuable online wellness platform. It provides expert-curated and scientifically backed mental health self-care content and includes an expansive library of tools and assessments.

#### **Employee Assistance Program**

eaphelplink.com (company code: UI1)

You and covered dependents have access to eight no-cost counseling sessions per issue, per year, per person for concerns such as anxiety, depression, grief, relationship issues and more. The EAP also includes financial and legal consulting, assistance with provider searches for childcare and eldercare, and professional development resources. Services are available 24/7.

## Online-Based Cognitive Behavioral Therapy

uidaho.cbt.telushealth.com

Through virtual therapy with TELUS Health CBT, learn how to change the thoughts, feelings and behaviors causing your problems. Get 24/7/365 help for anxiety, depression, insomnia, pain management, burnout and more. A therapist continually reviews your progress.

#### **VOLUNTARY BENEFITS AND PROGRAMS**

The university offers access to a variety of voluntary benefits and programs at discounted rates through Corestream. Employees pay the full cost of these benefits.

#### **Accident Insurance\***

Covers unexpected costs following a covered accident.

#### **Auto and Homeowners Insurance**

Special rates on auto and home coverage through three major companies.

#### **College Debt Benefits**

Support from GradFin to help you manage your or a dependent's student loan debt.

#### **Critical Illness Insurance\***

Protects you against a predetermined list of critical illnesses, such as cancer.

#### **Hospital Indemnity Insurance\***

Provides you with a payout for certain costs related to long-term hospital stays.

#### **Identity Theft Plan**

Identity and financial information protection coverage through ID Watchdog.

#### Legal Plan\*

Access to experienced attorneys nationwide through LegalEASE.

#### **Loan Program**

Low-cost personal loans through Kashable, repayable through payroll deduction.

### MASA Medical Transport Solutions

Coverage for out-of-pocket costs of emergency ground and air ambulance trips.

#### **Payroll Purchasing Program**

Products and services bought through payroll deduction instead of traditional financing options.

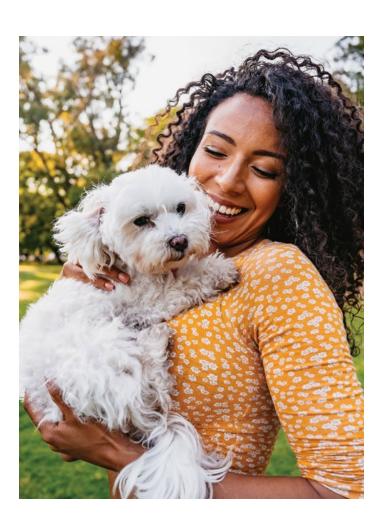
#### Pet Insurance

Discounted insurance through Nationwide.

## Universal Life Insurance with Long-Term Care Benefit\*

Gives you added financial protection when the unexpected happens and to help with long-term care services costs.

\*Must enroll in coverage as a new hire or during Annual Enrollment.



#### RETIREMENT BENEFITS

The university provides long-term financial protection with a defined benefit and defined contribution plan. You also have access to supplemental retirement plans that you fund.

## **PERSI Retirement Plan** for Hourly Employees

The PERSI Retirement Plan is a defined benefit plan that provides a monthly benefit payable at retirement. You and the university contribute.

- · You: 7.18% of your base annual salary, tax-deferred
- University: 11.96% of your base annual salary, tax-deferred

You're vested in contributions and investment earnings when you have five years of PERSI service credit.

# Optional Retirement Plan (ORP) for Faculty and Exempt Employees

The ORP is a defined contribution plan that you can take with you if you leave or retire. You and the university contribute.

- · You: 6.97% of your base annual salary, tax-deferred
- · University: 9.27% of your base annual salary, tax-deferred

You are immediately vested in this plan. You can invest in one or more investment options offered by Fidelity. Your account is yours to take with you if you leave or retire from the university.

## Supplemental Retirement Plans

You can opt to participate in the taxdeferred options below. The university does not contribute to these plans.

- 403(b)
- Roth 403(b)
- · 457(b)
- Roth 457(b)
- PERSI Choice 401(k)

