

HR

BENEFITS GUIDE

2020



BENEFITS

THE UNIVERSITY OF CENTRAL FLORIDA BENEFITS PACKAGE

Welcome to UCF! Whether you are a new employee or an existing employee, we are glad you are taking the time to learn about your benefits.

We are pleased to provide you with a wide range of competitive benefits that is a vital part of your total compensation. You have an impressive selection of benefits to choose from, so please carefully consider your personal benefits needs. It is important to gain a full understanding of all insurance and retirement plans to ensure you are making the best selections.

The UCF Human Resources Benefits Section offers enrollment labs to assist employees in completing their insurance and retirement enrollments. During these one-on-one sessions, key features of the benefits plans can be compared, and issues can be addressed that need to be considered when making election decisions. The sessions are available by appointment only. To make an appointment, please call or email the UCF Human Resources Benefits Section.

To determine which Benefits team member is assigned to your college/department, reference the Human Resource Point of Contact list here:
<http://hr.ucf.edu/files/HRServicePointofContactInformation.pdf>.

CONTACT US

Office of Human Resources | Benefits Section
3280 Progress Drive, Suite 100
Orlando, Florida 32826-2912



407.823.2771 |



Secure eFax: 407.882.9022 |



benefits@ucf.edu

hr.ucf.edu



This guide contains only general and summary information; it should not be considered a replacement for the more detailed information set forth in certificates of coverage or plan documents produced by each insurance company. Every attempt is taken to assure the accuracy of this guide; however, in the event of any conflict between this guide and information produced by each insurance company, the insurance company's documents will be the final authority.

Table of Contents

Commonly Used Health Insurance Terms.....	4
Employment Classifications	5
Benefit Eligibility Overview.....	6

STATE GROUP INSURANCE PROGRAM

People First	7
Employee Eligibility	9
Dependent Eligibility	12
Making Changes to Your Plans	13
Dependent Eligibility Verification.....	15
Health Insurance.....	16
Prescription Drug Plan.....	22
Health Savings Account	23
Shared Savings Program	25
Health Reimbursement Account.....	28
Dental Insurance.....	29
Vision Insurance	32
Flexible Spending Account	33
Life Insurance.....	36
Other Supplemental Plans.....	38

OTHER BENEFITS

The Gabor Agency	39
Workers' Compensation.....	42

RETIREMENT PLANS

FICA Replacement Plan.....	43
State of Florida Retirement Plans	45
Reemployed Retirees.....	49
Voluntary Retirement Plans	50

OTHER INFORMATION

Paid Time Off.....	52
Additional Employee Benefits	55
Other Important Information	58
Contact Information.....	59
New Hire Enrollment Checklist.....	61

Commonly Used Health Insurance Terms

Health insurance is complicated. Learning about available health insurance plans can be overwhelming, especially if you aren't familiar with some of the more common health insurance terms. Read through the definitions below to gain a better understanding of health insurance basics.

Term	Definition	Example
Coinsurance	Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the allowed amount for the service. You pay coinsurance after paying the deductible for the plan year.	If your health insurance plan's allowed amount for a covered service is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health insurance plan pays the rest of the allowed amount.
Copayment (or "copay")	A fixed amount that you pay for covered health care services including doctor visits, specialist visits, or prescription drugs. Once your copay is paid, your health insurance provider covers the remaining cost of the service. The amount of your copay can vary depending on the type of health care service.	If your plan has a \$25 copayment for routine doctor's visits, that means you must pay \$25 each time you go. Copayments are different than coinsurance, and typically are not applied towards the annual deductible.
Deductible	The amount you owe for health care services before your health insurance plan begins to pay.	If your deductible is \$1,000, your plan will not pay anything until you've met your \$1,000 deductible for covered health care services subject to the deductible. The deductible may not apply to all services.
Premium	The amount that must be paid for a health insurance plan by covered employees, by their employer, or shared by both. A covered employee's share of the annual premium is generally paid periodically, such as bi-weekly, and deducted from his or her paycheck.	If the health plan you've chosen costs \$180 per month, that is your premium.

Employment Classifications

The University of Central Florida employs more than 12,000 individuals in various positions. Each employee is designated in a specific classification, which determines the benefits that they are eligible for. For the purposes of determining your benefits eligibility, a list of employee classifications is included below.

Classification
A&P (Administrative & Professional)
Executive Service
Faculty (includes 12-Month and 9-Month)
Medical Residents
OPS (includes Adjunct Faculty, Hourly Non-Students, and Graduate Assistants)
Post-Doctoral Associates
USPS (University Support Personnel System)

If you are unsure of your classification, you can reference your paycheck via Employee Self Service in MyUCF (<https://my.ucf.edu>). Your classification is listed at the top of your paycheck under Pay Group, and your Job Title is listed in the section under it.

UCF Payroll Services Office of Human Resources, 3280 Progress Drive Ste 100 Orlando, FL 32826-3229	Pay Group: ORP-12 Month Faculty and A&P Ees Pay Begin Date: 01/17/2019 Pay End Date: 01/24/2019	Business Unit: Advice #: Advice Date:
Employee ID: Department: Location: Main Campus (Orlando) Job Title: Assoc Dir Hum Res/Per Pay Rate:	TAX DATA: Federal FL State	

Additional Resources

- <https://hr.ucf.edu/class-specifications-and-pay-plans/>



Benefit Eligibility Overview

State of Florida Group Insurance Program Benefits

Benefit	Eligibility
Health Insurance	A&P, Executive Service, USPS, Faculty, Post-Doctoral Associates, Medical Residents, and OPS
Spending Accounts (Flexible & Health Spending Account)	
Dental Insurance	
Vision Insurance	
Basic Life Insurance	
Dependent Spouse Life Insurance	
Dependent Child Life Insurance	
Accident Insurance	
Cancer Insurance	
Short Term Disability Insurance	
Hospitalization Insurance	
Optional Life Insurance	A&P, Executive Service, USPS, Faculty, Post-Doctoral Associates, and Medical Residents

The Gabor Agency Benefits

Benefit	Eligibility
Disability Insurance	A&P, Executive Service, USPS, and Faculty
Term and Universal Life Insurance	

Retirement Plans

Benefit	Eligibility
Florida Retirement System (FRS) Pension Plan	A&P, Executive Service, USPS, and Faculty
Florida Retirement System (FRS) Investment Plan	
State University System Optional Retirement Program (SUSORP)	A&P, Executive Service, and Faculty
FICA Replacement Plan	Mandatory for OPS Non-Student Employees, Adjunct Faculty, Post-Doctoral Associates, and Medical Residents
Pre-Tax and Post-Tax 403(b) Plans	A&P, Executive Service, USPS, Faculty, Post-Doctoral Associates, Medical Residents, and OPS
Pre-Tax 457(b) Plans	

Additional Employee Benefits

Benefit	Eligibility
Employee Assistance Program	All employees (excluding OPS student employees)
Tuition Waiver Program	A&P, Executive Service, USPS, and Faculty

People First



Because UCF is a public university, we participate in the State of Florida Group Insurance Program. People First is the plan administrator for the State Group Insurance Program. They are responsible for plan enrollments, determining eligibility, processing enrollment changes, COBRA, and retiree coverage administration.

User ID

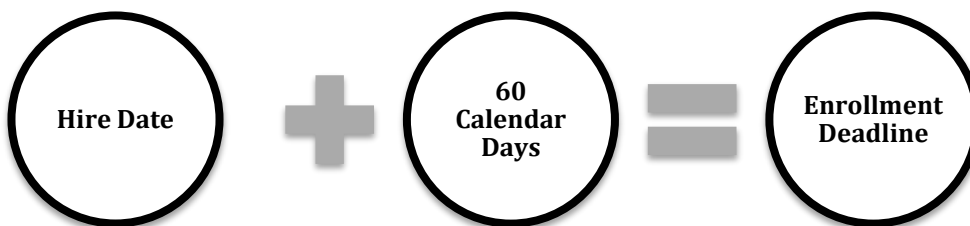
You will receive your People First ID in the mail. However, if you wish to enroll/access your account prior to receiving your ID in the mail, you may call People First or the Human Resources Benefits section directly. If you attend the in-person New Employee Orientation, you will receive your People First ID from a Human Resources team member.

International Employees

People First will not send an enrollment packet until they have a **valid Social Security Number** and a **valid address**. **Missing information can cause an employee to possibly miss their new hire enrollment window, and/or a delay in the start of insurance coverage.**

Insurance Effective Dates

Employees have **60 days** from their hire date to enroll in insurance. Employees may elect **health insurance** to begin the month after they are hired (if the election is completed during their month of hire) – this is called an **early effective date**. For example, if you are hired and complete your health insurance enrollment in June, you can start your health insurance July 1. Insurance premiums are paid one month in advance. Therefore, if you elect the early health insurance effective date, you may be contacted by the UCF Human Resources Benefits Section regarding a possible double deduction, depending on the timing of your election in the payroll processing cycle.



Using People First to Enroll

Online

<https://peoplefirst.myflorida.com>

- User ID and password required
- Default password: Pf + birth date (PfMMDDYY)
- Once you have made your selections, a confirmation statement will be generated for your records

Service Center

866.663.4735

- Available Monday-Friday 8:00am to 6:00pm ET
- User ID required
- Representatives will assist you in making your selections

Insurance Cards

Insurance cards will be mailed after the insurance effective date. If you need to use your coverage before you receive your insurance card in the mail, contact the health insurance provider to request a temporary electronic insurance card.

Rehire/Transfer Employees

If you are rehired or transferring from another state university within 26 weeks, or if you are rehired or transferring from another non-university state agency within 13 weeks, you are not considered a new employee in terms of benefits enrollment through People First. The benefits that you were previously enrolled in will be reinstated upon your rehire/transfer without a qualified status change event to cancel or change benefits.

For a full list of qualified status change events, reference the QSC Matrix on the MyBenefits website:

https://www.mybenefits.myflorida.com/health/eligibility_and_enrollment/making_changes_to_your_plan/making_plan_changes_with_a_qualifying_status_change_qsc_event.

IMPORTANT: OPS Employees

If you do not enroll in benefits as an eligible OPS employee when initially eligible, you will not be eligible to enroll (outside of a qualified status change and/or open enrollment) if you are hired into a regular (non-OPS) position, unless your break in service between your OPS and regular position is greater than 26 weeks.



Enrollment Tips

1. Watch for your benefit statement in the mail. It will show all of your options and costs, and explain possible effective dates of coverage.
2. Enroll within 60 days of your new hire/qualified status change event. If you miss your enrollment deadline, you must wait until the next open enrollment, unless you have another qualified status change event during the year that allows you to make a change.
3. Have correct Social Security numbers, birth dates, and required documentation to enroll your eligible dependents.
4. Choose your options carefully. Once you make an election during open enrollment or within the 60-day QSC event window, you cannot cancel or change to another plan (e.g., switch health insurance plans).

Additional Resources

- People First Enrollment Tutorial: <http://hr.ucf.edu/files/PeopleFirstOnlineReview.pdf>

Employee Eligibility: State Group Insurance Program

To be eligible to participate in the State Group Insurance Program, you must be one of the following:

- A full time regular employee (non-OPS);
- A part time regular employee (non-OPS); or
- A full time OPS employee.

New Hires

Upon hire, your position or expected hours of service will determine if you are eligible for insurance. Eligibility is determined by People First. Employees in the following positions are eligible to participate in all insurance plans offered under the group insurance program upon hire:

Regular Employees (non-OPS)	OPS Employees
<p><u>Full Time</u></p> <ul style="list-style-type: none"> • Working .75 full-time equivalency (FTE) or more <p><u>Part Time</u></p> <ul style="list-style-type: none"> • Working fewer than 0.75 FTE • Pay a pro-rata share of the health and life insurance employer premium based on the FTE, plus their employee share 	<p><u>Full Time</u></p> <ul style="list-style-type: none"> • Hired at a .75 full-time equivalency (FTE) or more

OPS employees expected to work fewer than 30 hours per week on average (less than .75 FTE) are not eligible for insurance upon hire. Eligibility is determined at the point of hire, and eligibility for subsequent plan years is determined using a look-back measurement method. The look-back measurement method is based on IRS final regulations under the Affordable Care Act (ACA), and its purpose is to provide greater predictability for eligibility determinations. The State of Florida uses a 12-month look-back measurement method to determine who is a full-time employee for purposes of eligibility.

OPS Employees: New Employee vs. Ongoing Employee Designation

New Employee	Ongoing Employee
<ul style="list-style-type: none"> • Employee hired at full-time (30 hours or more per week) and immediately eligible to enroll in coverage; or • Employee hired at part-time (less than 30 hours per week) and not eligible to enroll in coverage 	<ul style="list-style-type: none"> • Employees outside of their new hire measurement period; or • Employees rehired or transferring from another state university within 26 weeks of termination; or • Employees rehired or transferring from another non-university state agency within 13 weeks of termination

12-Month Look-Back Measurement Period

The 12-month look-back measurement method involves three different periods:

1. **Measurement Period:** Counts hours of service to determine eligibility for OPS employees, or future premium rate for non-OPS employees.

New Hire Measurement Period for OPS Employees	Open Enrollment Measurement Period for OPS Employees
<p>If you are not a full-time employee at the point of hire, your hours of service from the first day of the month following your hire date to the last day of the 12th month of employment will be measured.</p> <p><i>Example: Assume you are hired on October 5, 2020 as a part time employee. Your initial measurement period will run from November 1, 2020 through October 31, 2021. If your hours worked during the new hire measurement period average 30 hours or more per week, you are eligible to enroll in the program with an effective date of December 1, 2021.</i></p>	<p>If you have been employed long enough to work through a full 12-month measurement period, you are considered an ongoing employee. Your hours of service are measured during the open enrollment measurement period, which runs from October 3 through the following October 2 of each year and will determine eligibility for the plan year that follows the measurement period.</p> <p>If you are a new employee who is reasonably expected to work an average of 30 hours or more per week, you are eligible. Eligibility will continue until your hours are measured during the next or second (depending on your date of hire) open enrollment measurement period to determine eligibility for the next plan year.</p> <p><i>Example: Assume you are hired on January 5, 2020 in an OPS position and are expected to work an average of at least 30 hours per week. You are eligible to enroll in the program at your point of hire and will continue to be eligible through December 31, 2021. You will then be measured on October 3, 2021 to determine your eligibility for the 2022 plan year.</i></p>

2. **Stability Period:** Follows a measurement period. Your hours of service during the measurement period determine whether you are a full-time employee who is eligible for coverage during the stability period. As a general rule, your status as a full-time employee or a non-full-time employee is “locked in” for the stability period, regardless of how many hours you work during the stability period, as long as you remain an employee at UCF (or another State of Florida agency/public university that participates in the State Group Insurance Program).

There are exceptions to this general rule for employees who experience certain changes in employment status. For ongoing employees, the stability period lasts 12 consecutive months. Newly hired full-time employees may have a stability period longer than 12 months depending on their date of hire.

3. **Administrative Period:** The time between the measurement period and the stability period when administrative tasks, such as determining eligibility for coverage and facilitating enrollment, are performed. If you are determined to be eligible, a benefits package showing your available options, costs and effective dates will be mailed to the mailing address on file in People First, the system of record.

The rules for the look-back measurement method are very complex, and this is a general overview of how the rules work. If you have any questions about this measurement method and how it applies to you, call the People First Service Center at 866-663-4735, weekdays from 8 a.m. to 6 p.m. ET.

OPS Employee Plan Year Eligibility Criteria

Plan Year: January 1, 20xx – December 31, 20xx

New Employees		Ongoing Employees	
Hired and reasonably expected to work 30 hours or more per week	<p>Eligible to elect benefits upon hire</p> <p><i>Does NOT have a New Hire Measurement Period. Eligibility for future coverage is determined at the first full Open Enrollment Measurement Period.</i></p>	<p>Worked an average of 30 hours or more per week over the Open Enrollment Measurement Period (10/3/xx – 10/2/xx)</p>	<ul style="list-style-type: none"> • Eligible for benefits for the next plan year • Enroll during Open Enrollment • Earliest coverage could begin: January 1, 20xx
New employees hired who were not reasonably expected to work 30 hours or more per week	<p>Not Eligible for benefits upon hire</p> <p><i>Eligibility for future coverage is determined at the end of their 12-month New Hire Measurement Period.</i></p>	<p>Did NOT work an average of 30 hours or more per week over the Open Enrollment Measurement Period (10/3/xx – 10/2/xx)</p>	<ul style="list-style-type: none"> • Not Eligible for benefits for next plan year • Eligibility for future coverage will be determined at the end of the next open enrollment measurement period (10/3/xx – 10/2/xx)

Reminders

- An increase in weekly standard hours to 30 or greater will result in a change in eligibility and open a 60-day QSC window to allow enrollment in coverage.
- If a full time line or full time OPS employee changes to part time, they are still entitled to the full time employer premium for the remainder of their stability period.
- A decrease or increase in standard hours may impact eligibility for the next measurement period and plan year.

Additional Resources

- Eligibility and Enrollment: https://www.mybenefits.myflorida.com/health/eligibility_and_enrollment
- OPS Eligibility & Measurement Periods Guide: <https://hr.ucf.edu/files/OPSEligibilityMeasurementPeriodsReferenceGuide.pdf>

Dependent Eligibility: State Group Insurance Program

The following dependents are eligible for coverage:

Dependent	Description
Your spouse	The person to whom you are legally married.
Your child	Your biological child, child with a qualified medical support order, legally adopted child, or child placed in the home for the purpose of adoption in accordance with applicable state and federal laws through the end of the calendar year in which he/she turns 26.
Your stepchild	The child of your spouse for as long as you remain legally married to the child's parent through the end of the calendar year in which he/she turns 26.
Your foster child	A child that has been placed in your home by the Department of Children and Families Foster Care Program or the foster care program of a licensed private agency through the end of the calendar year in which he/she turns 26.
Legal guardianship	A child for whom you have legal guardianship in accordance with an Order of Guardianship pursuant to applicable state or federal laws or a child for whom you are granted court-ordered temporary or other custody through the end of the calendar year in which he/she turns 26.
Your over-age dependent	After the end of the calendar year in which he/she turns 26 through the end of the calendar year in which he/she turns 30 – if he/she is unmarried, has no dependents of his/her own, is a resident of Florida or a full- or part-time student, and has no other health insurance.
Your over-age dependent with a disability	Your covered child with intellectual or physical disabilities. This child may continue health insurance coverage after reaching 26 and while remaining continuously covered in a State Group Insurance health plan, or if the child was over the age of 26 at the time of your initial enrollment. The child must be incapable of self-sustaining employment because of the intellectual or physical disability and be dependent on you for care and financial support.
Newborn child of a covered dependent	A newborn dependent of a covered dependent – a newborn child born to a dependent while the dependent is covered under the plan. The newborn must have been added within 60 days of the birth. Coverage may remain in effect for up to 18 months of age as long as the newborn's parent remains covered.
Children of law enforcement, probation, or correctional officers	Children of law enforcement, probation, or correctional officers who were killed in the line of duty and who are attending a college or university beyond their 18 th birthday.
Surviving spouse and dependents	The widow or widower of a deceased state officer, state employee, or retiree if the spouse was covered as a dependent at the time of death; or an employee or retiree who died before July 1, 1979; or a retiree who retired before January 1, 1976, under any state retirement system who is not eligible for any Social Security benefits. Upon remarriage, the widow or widower is no longer considered a surviving spouse. A surviving spouse shall report remarriage within 60 days of the remarriage. The surviving spouse and dependents, including any eligible children of a surviving spouse, must have been covered at the time of the enrollee's death and the coverage must have been continuous.



If dependent eligibility changes, you must notify People First within 60 days of the change.

Additional Resources

- Dependent Eligibility Website:
<http://mybenefits.myflorida.com/health/eligibility/dependents>

Making Changes to Your Plans

Changing Insurance Elections

Employees have two ways to change insurance elections after their 60-day new hire enrollment window:

1. Qualifying Status Change (QSC)

Examples: Marriage, divorce, birth of child, spouse insurance termination, etc.

Employees have **60 days** from the effective date of the event to contact People First

2. Open Enrollment

Open Enrollment is your once-a-year opportunity to make changes to your state group insurance benefits. Typically, Open Enrollment is held each Fall, and any changes made during Open Enrollment are effective January 1 of the following year. If you do not make changes during Open Enrollment, all of your elections will continue to the new plan year.

For additional information regarding open enrollment, new hire eligibility, and qualified status changes, visit the Making Changes to Your Plans page of State Group Insurance website:

http://mybenefits.myflorida.com/health/making_changes_to_your_plans.

When Coverage Ends

If you or your dependent experience a qualifying status change event that causes a loss of eligibility, coverage in State Group Insurance plans ends as follows:

If...	Coverage Ends
Your employment is terminated	On the last day of the month following the month you terminated employment (since premiums are paid one month in advance)
You are an OPS employee and no longer meet eligibility requirements	The last day of the current calendar year
You choose to stop coverage for yourself and/or your dependent(s) because of a qualified status change	On the last day of the month in which the qualified status change occurred
You choose to stop coverage for yourself and/or your dependent(s) during the open enrollment period	The last day of the current calendar (plan) year
Your dependent child turns 26	The end of the calendar year in which your dependent turns 26 (or 30 for over-age health coverage)
You have coverage as a surviving spouse of an employee or retiree	On the last day of the month in which you remarry

COBRA (Consolidated Omnibus Budget Reconciliation Act)

COBRA allows qualified participants to continue coverage of their healthcare flexible spending account, health reimbursement account, and health, dental and vision benefits through their employer's group insurance plan for a limited period of time under certain circumstances, including the following:

- Voluntary or involuntary job loss;
- Reduction in hours worked;
- Transition between jobs;
- Death;
- Divorce; or
- Other life events.

When you end employment, coverage ends for you and any covered dependents the last day of the month following the month of termination. For example, if your last day of work is June 23, coverage ends July 31.

People First will mail a COBRA package to your address on record when/if one of these events is reported. COBRA enrollees pay the entire monthly premium plus a 2% administrative fee. You and/or your dependents lose eligibility for COBRA when you become eligible for other group insurance (including Medicare), or if you fail to pay the premium by the last day of the coverage month.

For additional information regarding COBRA, visit <https://www.dol.gov/general/topic/health-plans/cobra>.



Dependent Eligibility Verification

During the 2017 Legislative Session, the Florida Legislature directed the Division of State Group Insurance (DSGI) to conduct an audit to ensure that dependents covered under the State Group Insurance Program meet eligibility requirements. Following the conclusion of the audit, DSGI began an ongoing quality assurance review to maintain the integrity of the State Group Insurance Program.



What does this mean to me?

If you add a dependent to your health insurance coverage, you will receive a request to provide documentation of your newly added dependent(s)' eligibility. This process applies to new hires, marriages, births, and other life events during the year as allowed by a qualifying status change (QSC) event.

Documentation requests will be generated through People First and sent via email from the PeopleFirstNoReply@ngahosting.com email to the employee's notification email in People First. If the employee does not have a notification email, a letter will be mailed to the employee's address on file. If employees do not send the required documents to DSGI within 60 days from the date of the request and/or if their documents do not prove dependent eligibility, insurance coverage on the dependents in question will be removed.

Important Notice

As prohibited by the rules of the program, the following acts will be treated as fraud or misrepresentation of material fact:

- Falsifying dependent information
- Falsely certifying ineligible persons as eligible
- Falsifying dependent documentation
- Falsely enrolling ineligible persons in coverage
- Falsifying the occurrence of QSC events
- Falsifying QSC event documentation

Such acts will require you to reimburse the plan for any fraudulent claims incurred for, or, if you are still within the COBRA election window, for paying COBRA premiums for any months that the ineligible person(s) was covered.

Additional Resources

- Dependent Eligibility Verification Website:
http://mybenefits.myflorida.com/health/dependent_eligibility_verification

Health Insurance

There are four health insurance plans offered through the State Group Insurance Program. Each plan provides comprehensive major medical and prescription drug coverage, as well as preventive care benefits.

1. Standard HMO

- Administered by Aetna, AvMed, Capital Health Plan, and United Healthcare (reference map on page 19 for HMO provider by Florida county)
- Only covers in-network services, except in emergency situations
- No deductible
- You pay copayments for services rendered in the HMO network
- Open Access - you can see the specialist you choose without a referral

2. High Deductible HMO

- Has the same providers and in-network requirements as the standard HMO
- Must meet a deductible (In-Network: \$1,400 per person; \$2,800 per family) before the plan pays for anything (except for certain preventive services and prescriptions)
- Once deductible is met, you pay coinsurance for all services and prescription drugs
- Can enroll in a Health Savings Account (HSA) to help offset your out-of-pocket costs; UCF will make a contribution of up to \$500 (annually) for individual coverage or up to \$1,000 (annually) for family coverage
- Open Access - you can see the specialist you choose without a referral

3. Standard PPO

- Administered by Florida Blue
- Provides coverage in and out of network
- You may receive care from any doctor or healthcare provider; however, your cost for care is lower when you use in-network providers
- Must meet a deductible (In-Network: \$250 per person; \$500 per family) before the plan pays towards the cost of your healthcare services, except for most preventive care services
- Must meet a deductible and pay coinsurance or copayments
- Can self-refer to specialists

4. High Deductible PPO

- Has the same provider and works like the standard PPO, except you have a higher deductible (In-Network: \$1,400 per person; \$2,800 per family) to meet before the plan pays for anything, except for most preventive care services
- Once deductible is met, you pay coinsurance for all services and prescription drugs
- Can enroll in a Health Savings Account (HSA) to help offset your out-of-pocket costs; UCF will make a contribution of up to \$500 (annually) for individual coverage or up to \$1,000 (annually) for family coverage
- Can self-refer to specialists

Health Plan Comparison	Standard			High Deductible (Pair with Health Savings Account)	
	HMO	PPO		HMO & PPO	PPO Only
	Network Only	Network	Out of Network	Network	Out of Network
Annual Deductible	None	Single: \$250 Family: \$500	Single: \$750 Family: \$1,500	Single: \$1,400 Family: \$2,800	Single: \$2,500 Family: \$5,000
Annual Global In-Network Out-of-Pocket Maximum	Per Individual: \$7,900 Per Family: \$15,800 (combined pharmacy and medical)		N/A	<u>HMO</u> Per Individual: \$3,000 Per Family: \$6,000 (combined pharmacy and medical) <u>PPO</u> Per Individual: \$4,400 Per Family: \$8,800	N/A
Preventive Care¹	Free	Free; no deductible	Amount between charge and out-of-network allowance; no deductible	Free; no deductible	Amount between charge and out-of-network allowance; no deductible
Primary Care	\$20 copayment	\$15 copayment	40% of out-of-network allowance plus the amount between the charge and the out-of-network allowance	Deductible then 20% of network allowed amount Deductible then 20% of out-of-network allowance	Deductible then 40% of out-of-network allowance plus amount between charge and out-of-network allowance
Specialist	\$40 copayment	\$25 copayment			
Urgent Care	\$25 copayment				
Emergency Room	\$100 copayment				Deductible then 20% of out of network allowance
Hospital Stay	\$250 copayment	20% after \$250 copayment	40% after \$500 copayment plus the amount between charge and out-of-network allowance	Deductible then 20% of network allowed amount	Deductible, \$1,000 copay, then 40% of out-of-network allowance plus the amount between charge and out-of-network allowance

¹ Preventive care based on age and gender.

Wellness Benefit Comparison	PPO Provider	HMO Providers		
	Florida Blue	Aetna	AvMed	UnitedHealthcare
Fitness Memberships	5%–20% discount at participating facilities	Discounts at participating facilities through partnership with GlobalFit	Access to more than 12,000 fitness clubs and exercise centers that offer free trials and discounted monthly dues and initiation rates	Health Allies provides up to 50% off enrollment fees and up to 10% off monthly fees at participating facilities
Weight Management	Discounts available through Jenny Craig and Retrofit	Program discounts available through eDiets, Jenny Craig, and Nutrisystem online weight management tools and resources	Weight Watchers reimbursement for up to one year of fees once you reach your goal weight	Discounts on Jenny Craig, Nutrisystem, and Think Light! online weight management program
Nutritional Counseling	Health Coach: 877-789-583	Discounts available for nutritional resources, including dietetic counseling, books and other products	Get 25% off on services offered by a registered dietitian	Online health coaching including nutrition program support and discounts on books and products; Provider may offer discounts on nutritional counseling
Nutritional Supplements	N/A	Save 15% on more than 2,400 over-the-counter vitamins and other homeopathic remedies	Members receive discounted prices on a broad choice of health and wellness supplements and products	Discounts on vitamins and foods at GNC stores and Step One Foods
Health Counseling	Health Dialog: 877-789-583	24/7 Informed Health® Line: 800-556-1555; Disease management nurse contact and online medical consultations with medical doctors with a 20-50% discount	24/7 Nurse On-Call support: 888-762-8633; Speak confidentially with a registered nurse about a health concern or learn more about surgery	Nurse Line: 877-614-0581; Nurse Chat available via myuhc.com
Exercise Classes	Discounts available	Discounts available, including yoga equipment, books and DVDs through Pranamaya	Discounts available	Included at participating gym locations

For additional information regarding specific wellness benefits, contact the provider directly.

Monthly Premiums

Premiums are deducted a month in advance (for example, the deductions taken in December are paying for January coverage).

Part time regular employees (non-OPS) who work less than .75 FTE pay a prorated share of the employer contribution, plus the employee contribution.

	Standard Health Insurance Plan (HMO or PPO)	High Deductible Health Insurance Plan (HMO or PPO)
Regular & OPS Employees	Single: \$50.00 Family: \$180.00 Spouse Program: \$30.00 (\$15/each employee)	Single: \$15.00 Family: \$64.30 Spouse Program: \$30.00 (\$15/each employee)
Executive Service	Single: \$8.34 Family: \$30.00	
Over-age Dependents (age 26 - 30)	\$763.80 Each	\$687.14 Each
COBRA	Single: \$779.08 Family: \$1,753.71	Single: \$700.88 Family: \$1,550.70

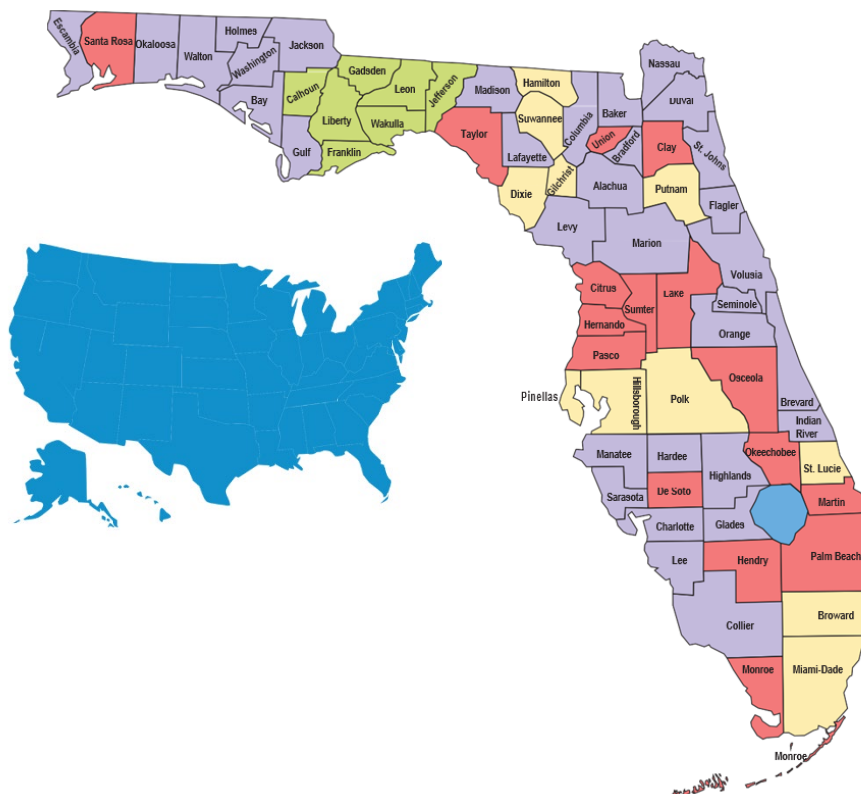
Health Plans by Region

HMO

- Capital Health Plan²
- AvMed¹
- United Healthcare¹
- Aetna¹

PPO¹

- Florida Blue



¹Self-insured/third-party administrator: the State Group Insurance Program bears the financial risk for payment of claims.

²Fully insured: the HMO bears the financial risk for payment of claims.



Review your health plan's online provider directory to ensure that your desired doctors and specialists are in the network:

https://www.mybenefits.myflorida.com/health/health_insurance_plans/health_plans_by_region.

Also, read your health plan's specific plan booklet and benefits document for detailed coverage information and exclusions: <https://www.mybenefits.myflorida.com/health/resources>.

Spouse Program

If you and your spouse are employed by a state agency and/or public university that participates in the State Group Insurance Program, you can participate in the **Spouse Program** and pay less for health insurance at a reduced premium of \$15.00 per month. To enroll in the Spouse Program, you must complete, sign and submit the **Spouse Program Election Form**

(http://mybenefits.myflorida.com/health/eligibility/spouse_program) to People First within 60 days of becoming eligible. For more information regarding the spouse program, visit

http://mybenefits.myflorida.com/health/making_changes_to_your_plans/spouse_program.

International Employees with J-1 Visas

U.S. federal regulations require J-1 Exchange Visitors and J-2 dependents to carry health (medical) insurance during the entire length of their program that meets minimum required health insurance coverage as per federal regulations:

- Medical benefits of at least \$100,000 per accident or illness
- Repatriation of remains (preparation and transportation of remains to home country) in the amount of \$25,000
- Expenses associated with the medical evacuation (transportation to home country when directed by attending physician) of the exchange visitor in the amount of \$50,000
- A deductible not to exceed \$500 per accident or illness
- Coverage for pre-existing conditions after a reasonable time period (as per industry standards)
- Covered benefits must be paid at 75% or more per accident or illness
- Policy must not unreasonably exclude coverage for perils inherent to the exchange visitor's program
- Insurance carrier must have an approval rating that is accepted as per Part 62.14 (c)(1) of Section 22 of the Federal Code of Regulations

To determine if your health insurance plan meets the federal requirements, reference your specific plan documents. For additional information regarding the insurance requirements for international employees, contact UCF Global (407-823-2337) or visit

<https://global.ucf.edu/scholarsandprofessionals/j1exchange/>.

OPS Employees with Graduate Assistantships

The College of Graduate Studies provides health insurance coverage for all university fellows and graduate assistants with appointments totalling 20 hours per week. OPS employees with graduate assistantships that meet the eligibility criteria for state benefits will be offered coverage by People First. Some of the plan differences are listed below:

UCF Student Health Plan

- Coordinated through College of Graduate Studies
- Administered by Student Health & Special Risk (formerly Gallagher Koster)
- Underwritten by UnitedHealthcare
- Individual coverage provided at no cost
**Family coverage available for purchase*
- Eligibility based on working 20 hours per week
- Coverage period is based on the academic term(s) that the student has a qualifying assistantship

State Group Insurance

- Coordinated through UCF Human Resources
- Administered by People First
- Underwritten by various insurance carriers
- Employees pay premiums for individual and family coverage
- Eligibility based on working average of 30 hours per week
- Coverage period is the calendar year
**For example, 1/1/2020-12/31/2020*

Eligibility for the State Group Insurance will not have an impact on eligibility or enrollment in the UCF Student Health Plan. Employees who are offered the State Group Insurance plan can elect coverage or choose to decline coverage without any changes to their current Student Health Plan.

It is important to note that international students with F-1 or J-1 Visas and their accompanying dependents are required to have health (medical) insurance coverage for their entire duration of studies at UCF that meets all the State of Florida Board of Governors regulations. The health plans offered by the State Group Insurance do not meet all of the State of Florida Board of Governors regulations. Additionally, to continue State Group Insurance coverage OPS employees must continue to meet the state's eligibility criteria on an annual basis.

For additional information regarding the UCF Student Health Plan, contact the College of Graduate Studies (407-823-2766) or visit <https://graduate.ucf.edu/health-insurance/>.


Additional Resources

- Health Insurance Plans Website:
http://mybenefits.myflorida.com/health/health_insurance_plans

Prescription Drug Plan

CVS Caremark administers prescription drug benefits for all health insurance enrollees.

Prescription drug costs differ depending on your health insurance plan and whether you buy generic, preferred brand, or non-preferred brand drugs.

	Standard HMO & PPO Health Insurance Plan		High Deductible HMO & PPO Health Insurance Plan
	Retail (30 Day Supply)	Mail Order & Retail (90 Day Supply)	<i>*After deductible</i>
Generic	\$7	\$14	30%
Preferred Brand-Name	\$30	\$60	30%
Non-Preferred Brand-Name	\$50	\$100	50%

Call (888) 766-5490 or visit www.caremark.com/sofrxplan to learn more about the preferred drug list (updated quarterly), maintenance medications list, specialty medications, mail order process, and 90-day maintenance at retail pharmacies.

You can create an account at www.caremark.com to see your prescription drug history, order refills, and check the status of your mail order drugs. CVS Caremark offers an online transparency tool to allow employees to see the cost of their prescription drugs, find out about generic options, and get the best value for their medications. You can access this tool by logging into your CVS Caremark account online.

Medication Synchronization (ScriptSync™)

ScriptSync™ enables patients with multiple maintenance medications to pick up all of their eligible prescriptions at the same time in a monthly CVS/pharmacy visit. It's simple to get started. Patients or their caregivers can enroll at their local CVS/pharmacy, and work with their pharmacist to align prescription fills and determine the best pickup date. Once aligned, they can then manage their prescriptions at the pharmacy or online at <https://CVS.com/ScriptSync>. The easy-to-use online support tools allow patients to view their prescription information, add or remove prescriptions from their ScriptSync order, and confirm or change their ScriptSync pickup date.



The UCF Pharmacy is an on-campus resource for prescription and over-the-counter medications. The pharmacy accepts most prescription insurance plans, so you can conveniently fill and pick up your entire family's prescriptions right on campus. For additional information, visit <https://shs.sdes.ucf.edu/services/pharmacy/>.

You will receive a separate prescription card from CVS Caremark. Your health insurance card is not used for prescriptions.

Additional Resources

- <http://mybenefits.myflorida.com/health/health insurance plans/prescription drug plan>

Health Savings Account

A Health Savings Account (HSA) is a tax-advantaged account that is available to you if you are enrolled in the High Deductible Health Plan (HDHP). It allows you to use pretax dollars to pay your health professional or reimburse yourself for eligible out-of-pocket medical costs not covered by your insurance (like deductibles and coinsurance).

How does it work?

- If you enroll in a high deductible HMO or PPO and elect an HSA, your HSA Advantage bank account is opened through Chard Snyder.
**In some instances, Chard Snyder will request additional information to open your account.*
- After the bank account is opened, UCF will make a contribution of up to \$500 (annually) for individual coverage or up to \$1,000 (annually) for family coverage. Important: you will have to elect the UCF contribution during your enrollment; this isn't automatic.
- If you choose during your enrollment, UCF will also deduct pretax money (up to the IRS maximum included in the chart below) from your pay and deposit it to your account. This means you will not pay federal income tax or Social Security taxes on those dollars.
- You do not have to make a contribution to your HSA to receive the UCF contribution. You must simply enroll in a high deductible health plan (HDHP) and elect to have an HSA. The UCF contribution is made each pay period over the course of a calendar year, in equal amounts. Even if you are not sure that you want to contribute to an HSA, you may wish to enroll to ensure you receive the UCF contribution.
- You may change the amount of your contribution by contacting the People First Service Center (866-663-4735) at any time.
- You will receive your Chard Snyder benefit card by first class U.S. mail delivery. Remember, like any other bank account, you may only spend up to your current balance.
- Unused funds roll over each year, and you can take your HSA with you when you leave UCF/State of Florida employment.

Annual Contribution Limits

2020 IRS Limits	UCF Contributes	Employee Contribution Maximum	Total Contribution Maximum (UCF + Employee Contributions)
Employee Only	Up to \$500/Year	\$3,050/Year	...up to \$3,550/Year
Family Coverage	Up to \$1,000/Year	\$6,100/Year	...up to \$7,100/Year

**If you and your spouse each contribute through different employers, please note that the total contribution maximum is a household maximum.*



After you turn 55, you can make an additional \$1,000 catch-up contribution each year to maximize your savings.

Eligible Expenses

For a list of eligible healthcare expenses, visit <https://peoplefirst.myflorida.com> and click on the Chard Snyder quick link to access the Chard Snyder portal. Click on the Tools & Support tab to find the Eligible Expenses table for a complete list of eligible expenses.

How to Pay for Expenses

1. Use your Chard Snyder benefit card to pay for eligible expenses at a store; or
2. Pay a vendor's bill online; or
3. Reimburse yourself by transferring funds to your personal checking or savings account from your HSA account.

Keep Good Records and Save Your Receipts

The IRS may require you to prove that money taken from your HSA Advantage account was used for eligible expenses, so keep your proof with your tax information for at least three years. Your proof may be an Explanation of Benefits (EOB), bill or receipt, but not a canceled check or debit card receipt. Your EOB, bill or receipt must provide the date of the expense, a description of the item or service, the name of the store or provider and the amount you paid. Your expenses must occur after your plan begins and your bank account is open.

Are You Eligible for an HSA?

You are not eligible to enroll or put money into an HSA Advantage account if any of the following is true:

- You are enrolled in Medicare or Medicaid.
- You have contributed the annual contribution limit to another HSA or medical savings account (MSA) for the same year.
- Your spouse is enrolled in a healthcare plan (includes any health reimbursement arrangement offered by an employer) that provides you with benefits before you have met the IRS minimum deductible for the year (\$1,350 for single coverage and \$2,700 for family coverage).
- You have received healthcare benefits (other than dental, vision, preventive or service related) from Veterans Affairs (TRICARE) within the last three months (including prescriptions).

Important Information

Under high deductible health plans, you are responsible for 100% of medical bills and prescription costs until your annual deductible has been met.

Additional Resources

- https://www.mybenefits.myflorida.com/health/savings_and_spending_accounts/health_savings_account

Shared Savings Program

The Shared Savings Program is a voluntary program that is available to you and your dependents who are enrolled in the State Group Insurance health plan. The purpose of the Shared Savings Program is to reduce healthcare costs and reward you for making informed and cost-effective decisions about your healthcare.

Under the Shared Savings Program, you can earn rewards by receiving rewardable healthcare services using **Healthcare Bluebook** and **SurgeryPlus**. Rewards will be credited to the savings and/or spending account of your choice, and you can use the funds to pay for future eligible medical, dental, and vision expenses.

You can earn rewards through one or both of the following benefits:

1. “Shop” for eligible healthcare services on the Healthcare Bluebook transparency website (<http://www.healthcarebluebook.com/cc/SOF>) or mobile app (mobile code: SOF). The website and mobile app will identify certain healthcare services that are available for a reward. Rewards will be credited to your account after you “shop” for a rewardable healthcare service on the website, receive the service, and the claim has been paid.
2. Receive a “bundled” medical service offered by SurgeryPlus. Each healthcare service will be available for a reward. After you receive the healthcare service and the claim has been paid, the reward will be credited to your account.

Healthcare Bluebook™

Healthcare Bluebook is a voluntary benefit that offers an online transparency website for you to “shop” for healthcare services, facilities, and providers. Healthcare Bluebook’s website (<http://www.healthcarebluebook.com/cc/SOF>) and mobile app show you the range of costs and the quality of in-network healthcare services in your area. You can then earn rewards for some of the services that you or your dependents “shop” for.

Healthcare Bluebook rates providers and healthcare facilities on cost and quality. Services that are eligible for rewards will be those rated “green.” More information about the cost and quality ratings is available online.

Under Healthcare Bluebook’s “Go Green to Get Green” rewards program, the website or mobile app will identify the healthcare services that have rewards and specify the reward amount. You earn the reward once the following occurs:

1. You or your dependent use Healthcare Bluebook to “shop” for a rewardable healthcare service;
2. Healthcare Bluebook validates that you or your dependent received a rewardable healthcare service and used its service to “shop” for the healthcare service; and
3. Healthcare Bluebook notifies the Division of State Group Insurance that you or your dependent earned the reward.
4. The reward will then be credited to the spending and/or saving account of your choice.



SurgeryPlus is a voluntary benefit that provides non-emergency surgical services. By choosing to receive services through SurgeryPlus, you and your dependents can earn financial rewards that will be deposited into the spending and/or saving account of your choice.

SurgeryPlus is separate from your health plan and has its own network of high-quality providers. SurgeryPlus offers procedures that are covered under the State Group Health Insurance Program but is different from your health insurance plan, because surgical services are “bundled” together. For example, rather than paying separately for the surgeon, facility, anesthesiologist, and radiologist, SurgeryPlus negotiates one “bundled” rate. By packaging surgical expenses into one simple, bundled rate, SurgeryPlus is able save money for you and the State of Florida Group Insurance Program.

SurgeryPlus offers a variety of medical procedures, including the following:

<i>Ankle/Wrist/Elbow Replacement</i>	<i>Fusions</i>	<i>Pain Management</i>
<i>Arthroscopy</i>	<i>Gallbladder Removal</i>	<i>Rotator Cuff Repair</i>
<i>Bladder Repair</i>	<i>General Surgery</i>	<i>Septoplasty</i>
<i>Cardiac</i>	<i>Genitourinary</i>	<i>Shoulder Replacement</i>
<i>Cardiac Defibrillator Implant</i>	<i>Hernia Repair</i>	<i>Sinuplasty</i>
<i>Cardiac Valve Surgery</i>	<i>Hip Replacement</i>	<i>Spine</i>
<i>Carpal Tunnel Bunionectomy</i>	<i>Hysterectomy</i>	<i>Stellate Ganglion Block</i>
<i>Cervical Epidural</i>	<i>Knee Replacement</i>	<i>Tendon Repair</i>
<i>Disk Repair/Replacement</i>	<i>Laminectomy</i>	<i>Thyroidectomy</i>
<i>Ear, Nose & Throat</i>	<i>Laminotomy</i>	<i>Thyroidectomy</i>
<i>Eustachian Tubes</i>	<i>Lumbar Epidural Steroid</i>	
	<i>Orthopedic</i>	

To earn rewards, contact a SurgeryPlus Care Advocate (844-752-6170) to start the conversation about what services you need, and let them guide you through the process. You earn the reward once the following occurs:

1. You or your dependent use SurgeryPlus to receive a preoperative to post-operative surgical service;
2. SurgeryPlus validates that you or your dependent received a rewardable service; and
3. SurgeryPlus notifies the Division of State Group Insurance that you or your dependent earned the reward.
4. The reward will then be credited to the spending and/or saving account of your choice.

Choosing an account for your rewards

You have the opportunity to select a pretax account to which your rewards will be credited. You may make your selection through People First during Open Enrollment or throughout the year. Rewards will be automatically credited to the pretax account of your choice after you receive a rewardable healthcare service.

The spending and savings account selections available to you as part of the Shared Savings Program vary depending on your health plan.

Employees enrolled in the standard health insurance plan can choose from the following:

- Health reimbursement account
- Flexible spending account

Employees enrolled in the high deductible health insurance plan can choose from the following:

- Health savings account
- Post-deductible health reimbursement account
- Limited purpose flexible spending account

Shared Savings Program Rewards by Spending Account

Flexible Spending Account (FSA)/Limited Purpose FSA	Health Savings Account (HSA)	Health Reimbursement Account (HRA)
<ul style="list-style-type: none"> • Rewards earned in current plan year • Rewards are not immediately credited - they are deposited to account for the NEXT plan year • \$500 cap (any future awards over \$500 will be credited to a HRA) • Carry-over up to \$500 each year 	<ul style="list-style-type: none"> • Rewards earned in current plan year • Deposited to account in CURRENT plan year • Portable • Once HSA is maxed out, goes to next selection 	<ul style="list-style-type: none"> • The HRA will offer the most flexibility and ease of use for most employees • If in High Deductible Health Plan: Must meet the federal deductible before you can use rewards • There is no limit of shared savings rewards you can deposit to the HRA • Shared savings rewards are credited to the HRA as they are earned • The money will remain in the account as long as you are active in a State Group Insurance health plan • The account allows for employer reward contributions only

More information about the accounts you can select to receive reward payments is available at https://www.mybenefits.myflorida.com/health/savings_and_spending_accounts.

Additional Resources

- https://www.mybenefits.myflorida.com/health/shared_savings_program/
- Healthcare Bluebook: <http://www.healthcarebluebook.com/cc/SOF>
- SurgeryPlus: <https://florida.surgeryplus.com>

Health Reimbursement Account

The new Shared Savings Program allows you to earn rewards for choosing high quality, low cost providers and share in the savings with the State of Florida Group Insurance Program. Rewards earned will be credited to your Health Reimbursement Account (HRA) or another designated savings and spending account of your choice to save on eligible medical expenses.

How Does it Work?

The program is available to you if you are enrolled in a health plan offered under the State Group Health Insurance Program. If you are enrolled in a high deductible health plan, you are eligible for the post-deductible HRA.

Use the funds in your designated account by December 31 and submit all claims by April 15 of the next plan year. The balance in your HRA rolls over from year to year as long as you are employed with UCF/State of Florida. If you are no longer employed by a state agency or public university that participates in the State of Florida Group Insurance Program, the money will be forfeited unless you have elected to continue your medical coverage through COBRA.

The HRA is compatible with the full healthcare FSA, limited purpose FSA, and dependent care FSA. If you are enrolled in a high deductible health plan with an HSA, you must choose the post-deductible HRA.

Eligible Expenses

For a list of eligible healthcare expenses, visit <https://peoplefirst.myflorida.com> and click on the Chard Snyder quick link to access the Chard Snyder portal. Click on the Tools & Support tab to find the Eligible Expenses table for a complete list of eligible expenses.

How to Pay for Expenses

1. Use your Chard Snyder benefit card to pay for eligible expenses; or
2. Pay your provider directly from your account online; or
3. Pay out of pocket for eligible expenses, then submit claims to be reimbursed.

Health Reimbursement Account vs. the Post-Deductible HRA

The post-deductible HRA works the same way, except funds are not available for use until you have met the IRS minimum deductible for the year (\$1,350 for single coverage and \$2,700 for family coverage).

Additional Resources

- https://www.mybenefits.myflorida.com/health/savings_and_spending_accounts

Dental Insurance

The State of Florida Group Insurance Program offers you comprehensive dental coverage through an array of dental plans. Each plan is designed to meet the needs of employees based on their individual plan usage, flexibility in using network or non-network dentists, and cost.

How to choose a dental plan

1. Compare the four dental plan options.
2. Confirm your dentist and dental specialists participate in the plan's network and accept the specific plan.
3. Think about your likely dental care needs and compare the costs for that care under the different plan options.
4. Read the dental plan documents and/or call the insurance companies for specific questions you have about coverage.

Dental Plans Comparison Chart

	Prepaid Dental	Dental Preferred Provider Organization (DPPO)	Dental Indemnity with a DPPO Network Plan	Indemnity Plan
Definition	Must use network dental providers. No coverage for out-of-network services	May use any dental provider, but you pay less when using in-network dental providers	May use any dental provider but pay discounted rates when using in-network dental providers	May use any dental provider, but you pay first and then get reimbursed a set fee (scheduled amount) for covered services
Choice of Providers	Network only	In-or-out of network		Any you choose
Preventive Care	No charge for most preventive services	No charge for in-network; you pay 20% of costs for out-of-network	You pay cost above set dollar amount	
Deductible	No	Yes, for basic and major care		
Basic and Major Care	You pay set copayments or a percentage of cost	You pay a percentage of cost for the Standard plan; For the Preventive plan you will pay the full negotiated rate for major care	You pay cost above a set dollar amount or a percentage of cost	You pay cost above a set dollar amount
Calendar Year Max	No	Yes		
You Should Know	Your dentist could leave the network at any time - this is not a qualifying status change event to cancel or change dental plans or coverage levels	You pay all charges above the annual maximum each calendar year; Your costs will be higher if you see an out-of-network dental provider	N/A	You pay all charges above the annual maximum each calendar year; Dentist fees are not negotiated by insurer, and dentists may charge any amount they choose per procedure

Dental Plans Comparison	Prepaid Dental Plans			Dental Preferred Provider Organization (DPPO) Plans		Dental Indemnity with a DPPO Network Plans		Indemnity Plan
	Cigna Prepaid Dental (4034)	Sun Life Prepaid Dental (4025)	Humana HD205 (4044)	Ameritas & Metlife Preventive PPO (4023 & 4033)	Ameritas & Metlife Standard PPO (4022 & 4032)	Ameritas & Metlife Indemnity PPO (4021 & 4031)	Sun Life Indemnity PPO (4074)	Humana Indemnity PPO (4084)
Type I: Preventative Services <i>(Routine & deep cleanings, X-rays, etc.)</i>	See benefit schedule: Fixed copayments			100% in-network; 80% out of network		100% in or out of network		See benefit schedule: Reimbursement amounts
Type II: Basic Services <i>(Fillings, root canals, etc.)</i>				80% in-network; 50% out of network		80% in or out of network		
Type III: Major Services <i>(Crown, bridges, etc.)</i>				No coverage	50% in-network; 30% out of network	50% in or out of network		
Annual Deductible	No Deductible			Type I: No Deductible Type II only: <u>Individual:</u> \$50 <u>EE + Spouse:</u> \$100 <u>EE+ Children:</u> \$100 <u>Family:</u> \$150	Type I: No Deductible Type II & III: <u>Individual:</u> \$50 <u>EE + Spouse:</u> \$100 <u>EE+ Children:</u> \$100 <u>Family:</u> \$150	Type I: No Deductible Type II: <u>Individual:</u> \$50 <u>EE + Spouse:</u> \$100 <u>EE+ Children:</u> \$100 <u>Family:</u> \$150	Type I, II, & III: <u>Individual:</u> \$50 <u>Family:</u> \$100	No Deductible
Annual Maximum	None			\$1,000	\$1,500	\$2,000	\$1,250	\$1,000
Orthodontia	Yes, No age limit			No coverage	Yes, No age limit		Yes, only dependents under 19	No coverage
Waiting Period for Orthodontic Services	No waiting period				12 month waiting period (may be satisfied w/ prior creditable coverage)	None		
Orthodontia Maximum	None				\$2,000 in network; \$1,500 out of network	\$2,500 in or out of network	\$1,500	

Dental Plan Monthly Premiums

People First Plan Code	Plan Name	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Prepaid Dental Plans					
4025	Sun Life Prepaid Dental	\$14.93	\$25.17	\$33.26	\$43.54
4034	CIGNA Prepaid Dental	\$24.01	\$47.31	\$56.41	\$72.06
4044	Humana HD205	\$12.64	\$21.20	\$23.00	\$32.98
Dental Preferred Provider Organization (DPPO) Plans					
4022	Ameritas Standard	\$33.72	\$63.16	\$70.72	\$102.96
4023	Ameritas Preventive	\$24.44	\$46.24	\$49.48	\$72.50
4032	MetLife Standard	\$33.36	\$61.72	\$68.96	\$100.12
4033	MetLife Preventive	\$22.86	\$42.28	\$47.24	\$68.58
Dental Indemnity with a DPPO Network Plans					
4021	Ameritas Indemnity	\$40.62	\$75.32	\$85.76	\$123.86
4074	Sun Life Indemnity	\$43.55	\$83.61	\$98.83	\$130.35
4031	MetLife Indemnity	\$47.32	\$87.54	\$97.80	\$141.98
Dental Indemnity Plan					
4084	Humana Schedule B	\$14.74	\$21.96	\$23.30	\$37.10

Dental Money Savers

- Review your dental plan's plan documents for benefit limits and exclusions, especially if you currently need major dental work.
- Confirm your dentist and dental specialists participate in your plan's network and accept the specific plan.
- Before making an appointment, call your prepaid dental insurance company to be added to your dentist's roster of patients; otherwise, you will have no coverage when you go.
- Ask your dentist for prior-treatment cost evaluation to avoid expensive surprises.

Additional Resources

- https://www.mybenefits.myflorida.com/health/dental_insurance_plans

Vision Insurance

Caring for your eyes is a very important part of your overall health and wellness. That's why the State of Florida Group Insurance Program offers you competitive vision coverage at affordable rates through Humana.

Exam & Materials

**Benefit frequency based on the service date and not per calendar year.*

Humana.	In Network	Out of Network
Exams Every	12 months	
Lenses Every	12 months	
Frames Every	24 months	
Eye Exam	100% after you pay \$10 copay	\$40 allowance
Lenses ¹	<ul style="list-style-type: none"> • Single: 100% after \$10 copay • Bifocal: 100% after \$10 copay • Trifocal: 100% after \$10 copay 	<ul style="list-style-type: none"> • Single: \$40 allowance • Bifocal: \$60 allowance • Trifocal: \$80 allowance
Scratch Resistant Lenses	\$25 allowance	Not Covered
Anti-Reflective Lenses	\$50 allowance	Not Covered
Frames	\$75 wholesale allowance	\$60 retail allowance
Contact Lenses ²	<ul style="list-style-type: none"> • Elective ³: \$150 allowance • Medically Necessary ⁴: 100% 	<ul style="list-style-type: none"> • Elective ³: \$75 allowance • Medically Necessary ⁴: \$100 allowance
LASIK	Humana is contracted with providers to offer LASIK procedures at substantially reduced fees. You can take advantage of these low fees when procedures are done by network providers. Participants receive a 25% discount off the usual and customary price or a 5% off advertised promotions or specials for LASIK services provided by in-network providers, whichever discount is greater. The discount includes consultations, laser procedure, follow-up visits and any additional necessary corrective procedures.	
Monthly Premiums	<ul style="list-style-type: none"> • Employee Only: \$6.96 • Employee + Spouse: \$13.74 • Employee + Children: \$13.60 • Family: \$21.36 	

¹ You can purchase either glasses or contact lens. Coverage applies to one or the other.

² This allowance is paid with the same frequency as lenses, in the place of the lens and frame benefit.

³ The contact lens allowance applies to evaluation and fitting fee, if applicable, and materials. Members may be eligible to receive up to a 15% discount on participating provider professional services.

⁴ Medically necessary (prior authorization required) is defined as 1) following cataract surgery without intraocular lens; 2) correction of extreme visual acuity problems not correctable with glasses; 3) anisometropia greater than 5.00 diopters and asthenopia or diplopia, with spectacles; 4) Keratoconus; or 5) monocular aphakia and/or binocular aphakia where the doctor certifies contact lenses are medically necessary for safety and rehabilitation to a productive life.



College Optical Express (located in the UCF Student Union) is a participating provider in the Humana network. For additional information, visit <http://collegeoptical.com/>.

Additional Resources

- Humana Vision Website: <http://www.compbenefits.com/custom/state-of-fla-vision/>

Flexible Spending Account

Chard Snyder is the administrator of three types of Flexible Spending Accounts (FSA) that give you a tax break on eligible out-of-pocket expenses:

1. Healthcare FSA
2. Limited Purpose FSA
**Only for participants in the high deductible health plan who are enrolled in HSA*
3. Dependent Care FSA

How does it work?

1. You set aside pretax dollars from your paycheck.
2. You submit eligible expenses for reimbursement throughout the year.
3. You are reimbursed.

After you enroll in the Flexible Spending Account, you will receive your Chard Snyder benefit card by first class U.S. mail delivery.

Healthcare FSA and Limited Purpose FSA

Healthcare FSA

You deposit pretax money into the account through payroll deductions to pay for eligible medical, dental, vision, preventative and prescription drug expenses.

Limited Purpose FSA

If you are enrolled in a health savings account, you are eligible to enroll in a limited purpose FSA. The limited purpose FSA works almost the same as the full healthcare FSA, except you cannot use it for medical expenses.

Dependent Care FSA

The dependent care FSA can be used to pay for the care of your natural, adopted, and foster children who have not reached their 13th birthday and family members who cannot physically or mentally care for themselves. All dependents must live with you for more than half the year. The IRS defines persons as physically or mentally not able to care for themselves if they cannot dress, clean, or feed themselves because of physical or mental problems; or persons who must have constant attention to prevent injuring themselves or others and are considered not able to care for themselves. If a dependent is over the age of 13, Chard Snyder will ask you to provide a letter of medical necessity describing the condition from which they suffer.

Couples who are married and filing a joint return and single parents may set aside up to \$5,000 each calendar year. Married couples filing separate tax returns may each set aside up to \$2,500 each calendar year. If your spouse is a full-time student or incapable of self-care, your maximum annual deposit is \$3,000 a year for one dependent and \$5,000 a year for two or more dependents.

Eligible Expenses

For a list of eligible healthcare expenses, visit <https://peoplefirst.myflorida.com> and click on the Chard Snyder quick link to access the Chard Snyder portal. Click on the Tools & Support tab to find the Eligible Expenses table for a complete list of eligible expenses.

How to Pay for Expenses

1. Use your Chard Snyder benefit card to pay for eligible expenses; or
2. Pay your provider directly from your account online; or
3. Pay out of pocket for eligible expenses, then submit claims to be reimbursed.

FSA Comparison

Plan	Healthcare FSA	Limited Purpose FSA	Dependent Care FSA
Enroll if you have	<ul style="list-style-type: none"> • Standard PPO or HMO health insurance plan; or • No health coverage 	<ul style="list-style-type: none"> • Any High Deductible health plan (HDHP) 	<ul style="list-style-type: none"> • Eligible expenses for “day care” for an eligible child or qualifying relative so you can work
Annual Contribution Maximum (Pretax)	\$60: Minimum \$2,750: Maximum		\$60: Minimum \$5,000: Maximum (per household)
Eligible Expenses	<p>Expenses not paid by insurance or reimbursed from any other source.</p> <p>Examples:</p> <ul style="list-style-type: none"> ✓ Deductibles ✓ Copayments ✓ Medical, pharmacy, dental, and vision expenses ✓ Orthodontia not covered by dental plan 	<p><u>Not available for medical expenses.</u></p> <p>Other expenses not paid by insurance or reimbursed from another source.</p> <p>Examples:</p> <ul style="list-style-type: none"> ✓ Dental and vision expenses ✓ Orthodontia not covered by dental plan 	<p>Care for a child, disabled spouse, or qualifying relative who:</p> <ul style="list-style-type: none"> ✓ is dependent on you ✓ needs care so that you (and your spouse if you're married) can work <p>Examples:</p> <ul style="list-style-type: none"> ✓ Daycare ✓ Elder care
Balance	Full balance is available immediately		Accumulated balance
Deadline to use funds	December 31 is the last day to incur claims for each plan year, and you must submit all claims by April 15 of the following year. Otherwise, if you have funds remaining at the end of each plan year, a maximum of \$500 will carry over to the next plan year while any funds in excess of \$500 will be forfeited.		“USE IT OR LOSE IT” Rule: Grace period to use funds ends March 15 and you must submit all claims by April 15 of the next plan year.



Estimate Tax Savings:


<http://www.chard-snyder.com/support-center/tools-and-apps/tax-savings-calculator>

Additional Resources

- https://www.mybenefits.myflorida.com/health/savings_and_spending_accounts

Savings and Spending Account Comparison	Flexible Spending Accounts (FSA)			Health Savings Account (HSA)
	Healthcare FSA	Limited Purpose FSA	Dependent Care FSA	
How It Works	You deposit pretax money into the account through payroll deductions to pay for eligible medical, dental, vision, preventative and prescription drug expenses.	You deposit pretax money into the account through payroll deductions to pay for eligible dental, vision, and preventive care expenses that are not covered by your high deductible health plan.	You deposit pretax money into the account through payroll deductions. You get reimbursed for eligible services (non-healthcare related) to care for children under age 13 that you can claim on your tax return or age 13 or older who lives with you at least 8 hours a day and needs supervised care, such as an elderly parent or spouse with a disability.	UCF contributes pretax money to your personal account each month for you to pay for eligible health expenses and save for future costs. You may also deposit pretax money.
Who Is Eligible	Benefits-eligible employees			Employees enrolled in a High Deductible Health Plan (HDHP)
Annual Employee Contribution Limit	\$60: Minimum \$2,750: Maximum		\$60: Minimum \$5,000: Maximum (per household)	\$3,550/year for single coverage \$7,100/year for family coverage (Limits include the UCF contribution) Employees ages 55+ may make catch-up contributions of an additional \$1,000/year
When Money Is Available	The total amount of your annual election is available January 1 (for open enrollment) or on your enrollment date (for new hires or if you have an appropriate Qualifying Status Change (QSC) event).		Money is added to your account after each payroll deduction. You may use only the amount you have in your account at the time.	As UCF deposits amounts into your Chard Snyder HSA Advantage™ personal savings account.
Deadline to Use Funds	Yes. Use funds by December 31 and submit all claims by April 15 of the next plan year. If any funds are remaining, up to \$500 will be carried over into the following plan year. Amounts over \$500 will be forfeited.		Yes. Grace period to use funds ends March 15 of the next plan year and you must submit all claims by April 15 of the next plan year. Otherwise, you lose any remaining money.	No. HSA works just like your savings account. Balance rolls over from year to year; take the money with you if you leave.
Shared Savings Program Rewards Eligibility	Yes. Earn up to \$500 in Shared Savings rewards. Shared Savings Program rewards are credited to your account on January 1 of the following plan year.		No.	Yes. Earn up to the annual contribution limit in Shared Savings rewards. Shared Savings Program rewards are credited to your account as they are earned.

Life Insurance

The State of Florida offers group term life insurance through  to eligible employees and their dependents.

Life Insurance Options

Type	Benefit Amount	Enrollment	Monthly Premium
Basic Life	\$25,000	<ul style="list-style-type: none"> • Full time regular (non-OPS) employees are automatically enrolled • Part-time and OPS employees must enroll if they wish to elect the coverage 	<ul style="list-style-type: none"> • Full time regular (non-OPS) employees: No cost (paid by UCF) • Part time employees: Prorated premium • OPS Employees: \$3.58
Optional Life <i>*OPS employees are not eligible for optional life</i>	1x - 7x/annual salary <i>*Maximum benefit of \$1,000,000</i>	<ul style="list-style-type: none"> • Up to the lesser of five times annual salary or \$500,000, if elected within 60 days of initial eligibility • Can elect up to 7x/annual salary if you qualify 	<ul style="list-style-type: none"> • Varies by coverage level, salary, and age (visit Securian website for calculation chart)
Dependent Spouse*	\$15,000 or \$20,000	Guaranteed issue if you enroll when first hired or when you marry	<ul style="list-style-type: none"> • \$4.50: \$15k Coverage • \$6.00: \$20k Coverage
Dependent Child	\$10,000 per each child	Guaranteed issue	<ul style="list-style-type: none"> • \$0.85 (Covers all eligible children)

**If your spouse is also a benefits eligible employee who is employed by a public university/state agency who participates in the State Group Insurance Program (or a State of Florida retiree enrolled in basic retiree life insurance coverage), you may not elect dependent spouse coverage.*

What is included in my life insurance plan?

Beyond paying a benefit in the event of your death, your group term life insurance plan has other important features.

- **Accidental Death and Dismemberment:** Your current life insurance is matched by an equal amount if death is the result of a covered accident. Dismemberment benefits are paid according to the schedule in the policy.
- **Portability:** If you leave UCF/State of Florida employment, other than by retiring, you may continue your basic and/or optional coverage to age 70 by paying premiums directly to Securian. Retirement is not an event that allows portability. Premiums may be higher than those paid by active employees.
- **Waiver of Premium:** If you become disabled before age 60, your life insurance premiums may be waived.
- **Accelerated Death Benefit:** If an insured employee becomes terminally ill with a life expectancy of 12 months or less, he/she may request early payment of up to 100% of the life insurance amount (up to \$1,000,000, basic and optional combined).

What additional services are available?

The following services are available to employees, their spouses, and dependent children covered under the Securian group life insurance policy. No additional premium or enrollment is required for these services.

- **Legal, Financial and Grief Resources:** LifeWorks provides access to counseling professionals and related resources and referrals in each of the three areas. Contact LifeWorks at 1-877-849-6034 or visit www.LifeWorks.com (user name: lfg, password: resources).
- **Legacy Planning Resources:** Access to resources to assist with dealing with the loss of a loved one or to plan for their own passing. These resources are available at www.LegacyPlanningResources.com. This service is also available to beneficiaries of employees and spouses covered under the group life insurance policies.
- **Beneficiary Financial Counseling:** PricewaterhouseCoopers provides beneficiary financial counseling for beneficiaries who receive proceeds of \$25,000 or more. The independent and objective financial counseling resources are available at a time when they are needed most.

Name Your Beneficiary

You can designate or change your beneficiary on the Securian Financial website (<https://web1.lifebenefits.com/sites/lbwem/florida>). Life insurance benefits are generally not governed by your will, so the only way to make sure your policy's benefits are paid to the people you intend is to make sure you've named a beneficiary. Although it is not mandatory that you name a beneficiary, it is usually the reason people buy life insurance in the first place – to provide a benefit to the people they care about.

Optional Life Selection Tool: Benefit Scout™

Benefit Scout™ provides guidance and education, cost calculators, virtual chat capabilities and on-demand benefit counselors. Employees are asked a few simple questions about their family, lifestyle, savings and debts. Then, Benefit Scout™ will analyze their answers with data and decision logic to calculate the options for them based on their unique needs; including specific voluntary insurance benefit recommendations and cost estimates. For additional information, visit the Securian Financial website.

Other Important Information

- You may increase your existing Optional Life insurance coverage by one level of annual earnings during Open Enrollment or following a qualified status change up to the lesser of five times your annual salary or \$500,000 on a guaranteed issue basis.

Additional Resources

- Securian Financial Website: <https://web1.lifebenefits.com/sites/lbwem/florida>
- Frequently Asked Questions: https://www.mybenefits.myflorida.com/health/resources/faq_s/frequently_asked_questions_state_group_life_insurance

Other Supplemental Plans

The following supplemental plans pay benefits directly to you, in addition to the coverage you receive from your health insurance plan (if enrolled). Certain requirements apply before these plans pay. Some plans require you to complete their medical underwriting process, and may also exclude coverage if you have pre-existing conditions or have reached their coverage age limit.

Plan Type	Type of Benefit	Offered By
Accident	<ul style="list-style-type: none"> Specified benefit amount(s) payable directly to insured for covered accidents in which a doctor's office or hospital is visited for treatment of an accidental injury Additional payments for follow-up visits and when crutches, wheelchairs or other covered medical aids are needed for covered accidental injuries Covers work and non-work related accidental injuries 	Colonial Insurance Company 888-756-6701
Cancer	<ul style="list-style-type: none"> Specified benefit amount(s) payable directly to insured for cancer screenings, diagnosis and treatment Utilize benefit payments as needed Benefit amounts dependent upon coverage level selected 	AFLAC (through Capital Insurance Agency)* 800-780-3100 Colonial Insurance Company 888-756-6701
Disability	<ul style="list-style-type: none"> Supplements income loss during short-term disability to help pay living expenses Can choose elimination period for accident and sickness related disabilities based upon need 	Colonial Insurance Company 888-756-6701
Hospitalization	<ul style="list-style-type: none"> Specified payment amounts directly to covered individual when hospitalized Additional payments, depending on coverage selected, for ancillary services related to hospitalization 	Cigna Health & Life Insurance Company (CHLIC) (through Capital Insurance Agency) 800-780-3100 New Era 800-277-2300
Hospital Intensive Care	<ul style="list-style-type: none"> Daily benefit for confinement in a hospital intensive care or a sub-acute intensive care unit 	AFLAC (through Capital Insurance Agency)* 800-780-3100

**Both the AFLAC Cancer and AFLAC Intensive Care policies require submission of a paper application. Upon completion of your election in People First, complete the AFLAC brochure on the MyBenefits website (https://www.mybenefits.myflorida.com/health/other_supplemental_plans) and mail to the address listed at the top of the application. Contact Capital Insurance Agency directly for application related questions.*

**Some plans do not offer coverage after age 70. Please check with the provider to verify eligibility.*

Additional Resources

- http://mybenefits.myflorida.com/health/supplemental_insurance_plans/other_supplemental_plans

The Gabor Agency

Additional post-tax options (separate from the offerings available through the State of Florida Group Insurance Program) including disability and life insurance, are available to eligible UCF employees through The Gabor Agency.

To enroll in the benefits offered by The Gabor Agency, contact 800-330-6115.

Disability Insurance

A group disability insurance policy provides an inexpensive way to help protect your income, your family, and yourself from loss due to an unexpected illness or injury.

- Replaces up to 60% of your income tax-free to a maximum of \$15,000 per month* payable to Social Security Normal Retirement Age (SSNRA**)
- Pays an additional 11% towards an annuity contract if disabled more than 12 months
- Benefits begin after either 30 or 90 days, according to the elimination period you choose
- Covers 80% to a maximum of \$20,000 to SSNRA for “catastrophic disability”***
- Includes a lifetime benefit of 60% of your income to a maximum of \$15,000 monthly starting at SSNRA in the event of “catastrophic disability”

**If you elect the 30-day plan, benefits from day 30 to day 90 will be paid on a weekly basis to a maximum of \$3,462 under a Short-Term Disability policy. After 90 days of disability, benefits are paid monthly through a Long-Term Disability plan as described above.*

*** Social Security Normal Retirement Age (SSNRA) means your normal retirement age under the Federal Social Security Act, as amended.*

**** A “catastrophic disability” is one that causes the loss of two of six Activities of Daily Living or a severe cognitive impairment. Catastrophic loss benefits pay after 90 days of disability and most occur while you are eligible for disability benefits.*

There are two disability options to choose from – the 30-day or the 90-day plan:

Plan	STD (30-Day Plan)	LTD (90-Day Plan)
Benefits Begin	On the 31 st day	On the 91 st day
Maximum Benefit Period	9 weeks	To age 65 or SSNRA
Benefit Percentage	66 2/3% of weekly pre-disability earnings	60% of monthly pre-disability earnings
Minimum/Maximum Benefit Amounts	Minimum: \$25/week* Maximum: \$3,462/week	Minimum: \$100/month* Maximum: \$15,000/month

IMPORTANT: College of Medicine Medical Residents

Group Long Term Disability insurance is available at no cost to active medical residents who are regularly working at least 20 hours per week. On the 91st day of disability, you will be eligible to receive the benefit.

The chart below compares the disability policy offered through the State of Florida (via Colonial) and the disability policy offered through The Gabor Agency (via The Standard).

Plan	Enroll via People First (Colonial)	Enroll via The Gabor Agency (The Standard)
New Hire Enrollment Deadline	60 days	Guaranteed Issue if enrolling within 90 days of eligibility
Premium Deductions	Pre-Tax <i>*When you receive your benefit, it is taxed.</i>	Post-Tax <i>*When you receive your benefit, it is not taxed.</i>
Benefits Pay After	0, 7, 14 or 30 days	30 or 90 days
Maximum Benefit Period	12 Months	Until Social Security Normal Retirement Age (SSNRA), as long as you are still disabled (90-day plan)
Monthly Premium Amount	Price based on the benefit amount and period elected. Minimum: \$17.50/month Maximum: \$114.00/month <i>*If your annual salary is over \$62,800, your benefits are capped at \$3,480/Month.</i>	30 Day Plan: Your Monthly Salary/100 * \$0.85 90 Day Plan: Your Monthly Salary/100 * \$0.59 <i>*If your annual salary is over \$300,000, your benefits are capped at \$15,000/Month.</i>
How to Enroll	Enroll on the People First website	Submit application (available on The Gabor Agency's website: http://www.gaboragency.com/your-benefits/university-central-florida/group-disability/disability-insurance) to UCF Human Resources Benefits Section via email (Benefits@ucf.edu) or secure eFax (407-882-9022)

Life Insurance

The security of long-term stability for your family in the event of unfortunate circumstances is a real consideration. Life insurance helps provide peace of mind and financial security. There are two types of life insurance available through The Gabor Agency:

- **Level Term Life Insurance:** Features of the plan include competitive pricing, predictable premiums, customizable coverage, advanced access for illness, and portable coverage. Underwritten by Symetra Life Insurance Company.
- **Group Term Life Insurance:** A low-cost life insurance policy with coverage that does not decrease with age as long as employment continues and premiums are paid. This policy is offered guaranteed issue with no medical exam required during the first 60 days of employment or during periodic open enrollments up to four times annual salary with a maximum limit of \$200,000. Employee spouses are also eligible for guaranteed coverage up to \$50,000 if payroll deducted. Underwritten by Standard Insurance Company.

The chart below compares the life insurance plans offered through the State of Florida Group Insurance Program and The Gabor Agency.

	<i>Enroll via People First</i>	<i>Enroll via The Gabor Agency</i>		
	Optional Term Life <i>(Securian Financial)</i>	Level Term Life <i>(Symetra)</i>	Group Term Life <i>(The Standard)</i>	Permanent Life [Universal Life UL-G] <i>(Symetra)</i>
New Hire Enrollment Deadline	60 Days	N/A (fully underwritten)	60 Days	N/A (fully underwritten)
Coverage Amounts	1x to 7x/ annual salary	10, 15, 20 or 30 year term	Lesser of \$200,000 or 4x/annual salary	Minimum \$50,000
Maximum Limits	\$1 Million	Contact The Gabor Agency	Employee: \$200,000 Spouse: Up to \$50,000	Contact The Gabor Agency
Coverage Guarantee Issue	Yes	N/A (fully underwritten)	Yes (if elected within first 60 days)	N/A (fully underwritten)
Can Premiums Increase	Yes	No	Yes	No (as long as premiums paid on time)
Policy is good for/until	Termination; May be portable	Length of term	No limit	No limit
Important Note	Premiums increase when salary increases or every 5 years when milestone birthday age is reached	Premiums are fixed once locked in for 10, 15, 20, and 30 year coverage; Contact Gabor regarding coverage ranges	Periodic open enrollments are held, offering up to 4x/annual salary coverage with a maximum limit of \$200k; Employee spouses are also eligible for guaranteed coverage up to \$50,000 if payroll deducted	This policy offers a Chronic Illness Rider; Up to 50% of the policy's death benefit can be accessed in advance if a chronic illness applies

Additional Resources

- The Gabor Agency UCF Website: <http://www.gaboragency.com/schools/university-central-florida>

Workers' Compensation

Workers' Compensation is insurance paid in full by UCF that provides coverage to an employee for a job-related injury or illness from the very first day of employment. Employees who are injured or become ill due to the conditions of their job receive partial income replacement and/or payment of expenses for medically necessary services under Workers' Compensation.

Workers' Compensation injuries are not covered by regular medical insurance. AmeriSys is the medical case manager for all Workers' Compensation claims. Any time an accident or an injury occurs, whether or not the employee wishes to seek medical care, it must be reported to AmeriSys. This should be done by the supervisor and employee, if available, as soon as possible.

AmeriSys ★ : 800-455-2079

For questions regarding the UCF Workers' Compensation insurance or procedures, contact the Human Resources Leave of Absence/Workers' Compensation section at loandworkcomp@ucf.edu or 407-823-2771.

Additional Resources

- UCF Human Resources Workers' Compensation Website:
<http://hr.ucf.edu/current-employees/compliance-information/workers-compensation-2/>



FICA Replacement Plan

The FICA Replacement Plan is a defined contribution plan authorized under section 401(a) of the IRS code. It is a tax qualified private retirement plan in which employees in certain positions are mandated to participate in lieu of paying Social Security FICA taxes.

Enrollment in the FICA Replacement Plan is automatic and mandatory for all:

- OPS Non-Students
- Adjunct Faculty
- Post-Doctoral Associates
- Medical Residents

Full-time student employees, graduate assistants, graduate teaching assistants, graduate research assistants, and employees holding dual compensation positions do not currently pay Social Security taxes and will not be enrolled in the plan.

Eligible employees will be automatically enrolled in the plan as of their first paycheck. Once a contribution has been made to the plan, the employee will receive additional information from TIAA, the plan administrator. TIAA can be contacted at 800-842-2776.

How the Plan Works

Under the UCF 401(a) FICA Replacement Plan, participants contribute 7.5% of their compensation to an account in their name. Contributions to the plan are made on a pre-tax basis, and participants pay no taxes on their earnings or contributions in their accounts until retirement. Any benefits which the participant has earned under Social Security or any other retirement plan will not be reduced by participating in this plan.

How to View Account

Contributions are placed in an account at TIAA. Once the initial contribution is made, you can view your account online at <https://www.tiaa.org>. Click on 'Register,' and follow the steps, which will ask for your information and allow you to create a user ID and password. The website offers many useful services, including managing your account, designating a beneficiary and signing up for e-statements.

How Contributions are Invested

You can direct how your contributions are invested among the available funds by accessing your account online at <https://www.tiaa.org> and making investment allocation elections. If you do not make an allocation election, your contributions will be directed to a target date fund based on your date of birth. Your benefit depends on the amount of money contributed to your account and its performance over time. An annual fee of \$25 (\$6.25 quarterly) applies to this plan, as well.

Withdrawal Periods

Withdrawals from the plan may be made at the following times:

- Termination of employment
- Retirement
- Participant's total disability
- Participant's death

Withdrawals from your account may be made in a lump-sum cash payment (IRS 10% penalty on early withdrawals may apply) or plan balances may be rolled over to an IRA or other eligible retirement plan with no penalty.

Effect of Plan Participation on Social Security Benefits

Employees are not subject to Social Security taxes while in this plan, and will not earn Social Security credit. For additional information regarding the effect of plan participation on Social Security benefits, visit <https://hr.ucf.edu/files/FaplanEffects.pdf>.

Additional Resources

- <https://hr.ucf.edu/current-employees/retirement/#fica>

State of Florida Retirement Plans

UCF offers the following mandatory retirement plans for A&P, Executive Service, USPS, and Faculty employees:

	Florida Retirement System (FRS) Pension Plan	Florida Retirement System (FRS) Investment Plan	State University System Optional Retirement System (SUSORP)
Eligibility	A&P, Executive Service, Faculty and USPS		A&P, Executive Service and Faculty <i>*College of Medicine Faculty: Mandatory</i>
Plan Type	Defined benefit plan; retirement benefit is based on a set formula	Defined contribution plan; retirement benefit is based on the amounts that have been contributed to the account and the performance of the investments	
When am I vested in my benefit?	You qualify for a benefit after 8 years of service ^{1,2}	You qualify for a benefit after 1 year of service ¹	You qualify for a benefit immediately upon enrolling
Who contributes and how much?³	<p>You: A mandatory 3% pretax employee contribution</p> <p>UCF: A fixed percentage of your gross salary as determined by the Florida Legislature</p>	<p>You: A mandatory 3% pretax employee contribution</p> <p>UCF: An amount equal to 3.3% of your gross salary (higher contribution for Special Risk and Executive Service classifications)</p> <p><i>*Anything in excess of the 3.3% employer contribution amount on your paycheck goes towards the Unfunded Actuarial Liability (UAL) and Admin fees, which are determined by the Florida Legislature</i></p>	<p>You: A mandatory 3% pretax employee contribution; you can make an additional pretax contribution of up to 5.14% of your gross salary (totaling 8.14%)</p> <p>UCF: An amount equal to 5.14% of your gross salary</p> <p><i>*Anything in excess of the 5.14% amount on your paycheck goes towards the Unfunded Actuarial Liability (UAL) and Admin fees, which are determined by the Florida Legislature</i></p>
Where are the contributions deposited?	Into a single trust fund for all FRS Pension Plan members	Into an account that is established in your name by the FRS	Into an account(s) that is established in your name by the SUSORP investment provider(s) you choose
Your Benefit	Pays a guaranteed lifetime benefit based on employee class, age, salary, and years of service while working for an FRS-participating employer	In both plans, your benefit depends on the amount of money contributed to your account and its growth over time; You decide how to allocate the money in your account among the available investment funds	

¹ You are always fully vested in your own contributions if you remain enrolled in the FRS plan you chose as a new employee. How your employee contributions are distributed or refunded to you depends on a number of factors, especially if you use your 2nd Election to change plans in the future.

² If you were initially enrolled in the FRS before July 1, 2011, your vesting requirement may be different. For important details, please refer to www.myfrs.com/FRSPro_ComparePlan_Vesting.htm.

³ Employee and employer contribution rates are subject to change by the Florida Legislature.

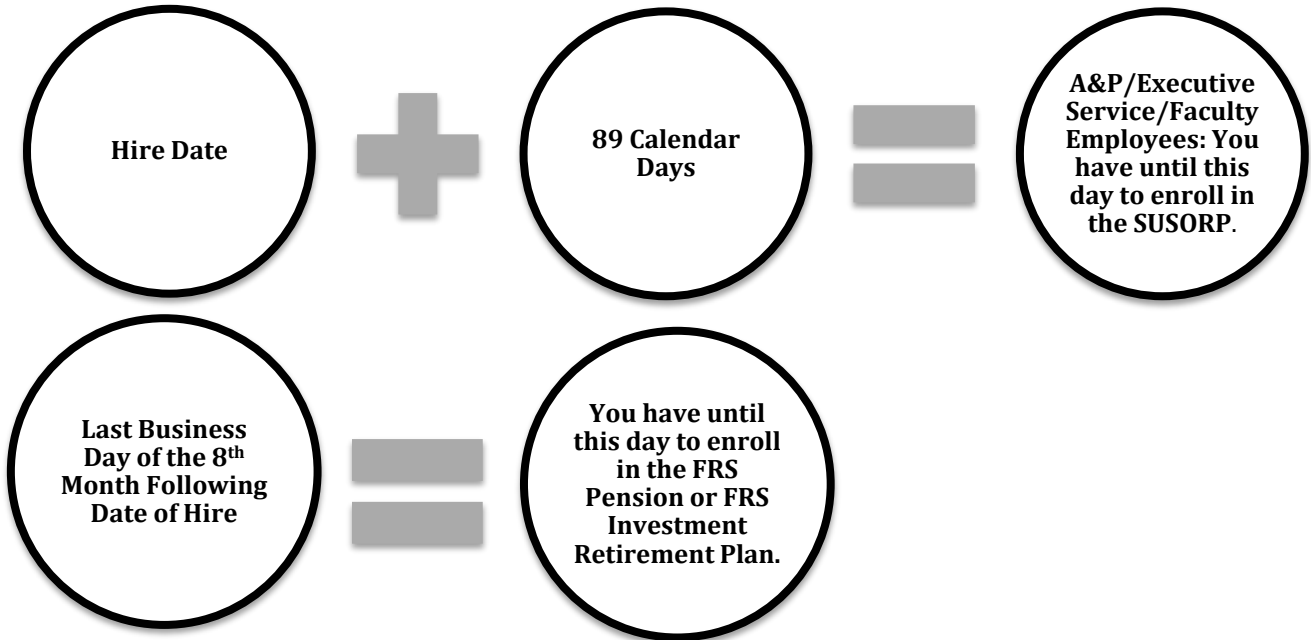
Enrollment

The chart below outlines the enrollment instructions and deadlines for all three plans.

	Florida Retirement System (FRS) Pension Plan	Florida Retirement System (FRS) Investment Plan	State University System Optional Retirement Program (SUSORP)
How to Enroll	<p>USPS Employees:</p> <ul style="list-style-type: none"> Complete EZ Retirement Plan Enrollment form (https://www.myfrs.com/pdf/forms/e1-ez.pdf) Fax or mail to FRS Plan Choice Administrator indicated on the form <p>A&P & Faculty Employees:</p> <ul style="list-style-type: none"> Complete ORP-ENROLL form (https://www.rol.frs.state.fl.us/forms/orp-enroll.pdf) Return ORP-ENROLL form to HR Benefits Section via secure eFax (407-882-9022) or password protected email attachment (benefits@ucf.edu) Complete EZ Retirement Plan Enrollment form (https://www.myfrs.com/pdf/forms/e1-ez.pdf) Fax or mail EZ Retirement Plan Enrollment form to FRS Plan Choice Administrator indicated on the form <p>Complete Beneficiary Designation Form FRS Pension Plan: https://www.rol.frs.state.fl.us/forms/ben-001.pdf FRS Investment Plan: https://www.myfrs.com/pdf/forms/ip_beneficiary.pdf</p>	<ul style="list-style-type: none"> Open SUSORP account with at least one of the SUSORP companies: <ol style="list-style-type: none"> AIG (formerly VALIC) Equitable (formerly AXA) Metlife TIAA VOYA *Local ORP representative contact information can be found here: http://hr.ucf.edu/current-employees/retirement/#retire1b Complete ORP-ENROLL form (https://www.rol.frs.state.fl.us/forms/orp-enroll.pdf) *Note: College of Medicine Faculty members and eligible reemployed FRS Investment Plan or SUSORP retirees (who are eligible for the SUSORP) must complete the ORP-MANDATORY form in lieu of the ORP-ENROLL form (https://www.rol.frs.state.fl.us/forms/orp-mand.pdf) Return ORP-ENROLL form and confirmation of SUSORP account to HR Benefits Section via secure eFax (407-882-9022) or password protected email attachment (benefits@ucf.edu) 	
Enrollment Deadline	<p>Last business day of the 8th month following date of hire</p> <p><i>*After the enrollment deadline, USPS employees are automatically defaulted to the FRS Investment Plan, with the exception of 'Special Risk' employees, who are automatically defaulted to the FRS Pension Plan</i></p>	<p>Hire Date + 89 Days</p> <p><i>*Note: If you do not elect the SUSORP within 3 months (Date of Hire + 89 days), you will be defaulted in the FRS Pension Plan, and if no election is made by the end of the 8th month after your month of hire, you will be automatically enrolled in the FRS Investment Plan</i></p>	



If you enroll in the SUSORP, you will continue to receive reminders (mailed to your home as well as emailed to you) from the FRS regarding the FRS enrollment. **You can simply disregard these reminders if you have already enrolled in the SUSORP.**



Consider Your Length of Service

If you stay with an FRS-participating employer for:	Retirement plan to consider:
Less than 1 year	SUSORP
1 to 8 years ¹	Investment Plan or the SUSORP
9 or more years ²	Depends on a number of factors. Call the toll-free MyFRS Financial Guidance Line to learn more.

¹ 1 to 6 years if you have Pension Plan service before July 1, 2011

² 7 or more years if you have Pension Plan service before July 1, 2011



Free Personalized Help is Available to You

FRS Retirement Plan Participants

Visit <http://myfrs.com> and review the 'New Hire' section on the website. You can also call the MyFRS Financial Guidance Line toll-free at 866-446-9377. Select Option 1 to speak with an unbiased Ernst & Young financial planner who can assist you with any questions that you may have about the Pension Plan and/or Investment Plan.

SUSORP Participants

Contact your SUSORP investment provider(s) for contract and investment product information. Local SUSORP representative contact information can be found here: <http://hr.ucf.edu/current-employees/retirement/#retire1b>.

Changing Your Election

If you elect the SUSORP retirement plan, you cannot change to a different plan later. You will remain in the SUSORP for as long as you remain at UCF in a SUSORP-eligible position.

If you enroll in the FRS Pension or Investment plan, you will have a one-time second opportunity during your FRS career (your second election) to change to the other FRS retirement plan. The SUSORP is not an available second election option. For additional information regarding the second election, visit https://www.myfrs.com/pdf/forms/2nd_election.pdf.

Additional Resources

- UCF Human Resources Retirement Website: <http://hr.ucf.edu/current-employees/retirement/>
- MyFRS (Florida Retirement System) New Hire Website: <https://www.myfrs.com/NewHire.htm>



Reemployed Retirees

Reemployment Restrictions

The Florida Retirement System has strict rules about reemployment after retirement. It is important to understand that any employee, regardless of age or years of service, who begins receiving their FRS Pension Plan, Investment Plan, or SUSORP benefit, becomes a retiree of the State of Florida, and may be subject to certain restrictions if returning to employment at a later date. Be aware that these restrictions only apply to former FRS or SUSORP retirees who come back to work at state of Florida agencies/universities. FRS retirees are free to work for any private employer, or public employer outside of the Florida Retirement System, without any restrictions.

If you are retired from the FRS Pension, FRS Investment or SUSORP retirement plans, a minimum of six full calendar months from the date of the first distribution is required before you can be rehired. If you come back before the six month minimum, you will be financially liable for repayment if in violation. If reemployed, monthly benefit/distribution will be suspended during months 7 through 12.

Renewed Membership

If you are retired from the FRS Pension Plan (or DROP), you are not eligible for renewed membership in any State of Florida retirement plan (FRS Pension, FRS Investment and/or SUSORP Plan).

If you are retired from the FRS Investment Plan or SUSORP Plan and are a reemployed retiree returning to work in an SUSORP eligible position, you must enroll in the SUSORP plan. Otherwise, if you are a reemployed retiree returning to work in a non-SUSORP eligible position, you must enroll in the FRS Investment Plan.

Different termination requirements and reemployment limitations apply if you retired prior to July 1, 2010.

Additional Resources

- MyFRS Reemployment After Retirement Website:
https://www.myfrs.com/FRSPro_ComparePlan_Reemp.htm

Voluntary Retirement Plans

UCF offers multiple voluntary savings plans to assist you in planning for your retirement. One way to meet long-term financial goals is to participate in a tax-deferred 403(b) or 457 plan and/or a post-tax Roth 403(b). Contributions to a voluntary 403(b) and/or 457 account are in addition to the FRS, SUSORP and FICA Replacement plans. UCF does not match voluntary employee contributions.

Although the UCF Benefits Section will make every effort to assist you with reaching your retirement goals, unexpected factors such as refunds, pay rate changes, and processing deadlines may affect your contributions. It is the employee's responsibility to monitor their contributions and limits by viewing their pay advice on a bi-weekly basis and consulting with their financial advisor and/or provider.

Plan	403(b)	457(b)
Who is eligible?	A&P, Executive Service, USPS, Faculty, Post-Doctoral Associates, Medical Residents, and OPS	
What is the total maximum annual contribution?	\$19,500 <i>*You can contribute the maximum to each plan (so, \$19,500 to the 403(b) and an additional \$19,500 to the 457(b) for 2020)</i> <i>*Voluntary State University System Optional Retirement Program (SUSORP) contributions count towards the annual 403(b) maximum contribution limit.</i>	
Age 50 Catch-Up Provision (for employees age 50 or over in 2020)	An additional \$6,500 <i>*You can contribute the maximum to each plan (so, \$6,500 to the 403(b) and an additional \$6,500 to the 457(b) for 2020)</i>	
Options Available	Pre-Tax and Post-Tax (Roth)	Pre-Tax
Enrollment Instructions	1. Open a voluntary retirement account with one (or more) of the three voluntary 403(b) companies: <ul style="list-style-type: none"> • AIG (formerly VALIC) • Fidelity • TIAA <i>*You can enroll online or by contacting a local representative. The online enrollment links and local representative contact information can be found here: http://hr.ucf.edu/current-employees/retirement/#retire1d.</i> 2. Complete the Salary Reduction Agreement (SRA) (http://hr.ucf.edu/files/SRA.pdf) 3. Return the completed SRA to the Benefits Section via secure eFax (407-882-9022) or password protected email attachment (benefits@ucf.edu).	There are two ways to enroll: <ol style="list-style-type: none"> 1. Complete the electronic EZ Enrollment Form by clicking 'Enroll Now' on the Bureau of Deferred Compensation website: https://www.myfloridacfo.com/DeferredComp/ 2. Contact one (or more) of the three voluntary 457 companies: <ul style="list-style-type: none"> • AIG (formerly VALIC) • Nationwide • VOYA <i>*Contact information can be found on the Bureau of Deferred Compensation website: https://www.myfloridadeferredcomp.com/SOFWeb/plan.aspx</i>
Enrollment Deadline	No deadline - employees can enroll and/or make changes to their contribution amounts at any time.	



CAPTRUST

If you're like most retirement plan participants, you may struggle with feeling confident about making financial decisions regarding how much to save or how to invest. You may have questions about your ability to retire when you are ready. We want to help you build a solid financial future. That's why we have hired CAPTRUST as a resource for your financial wellness. CAPTRUST is an independent investment advisory firm, and the financial counselors provide professional, unbiased investment advice. Best of all, the service is offered to you at no charge! When you work with CAPTRUST, they will create a Retirement Blueprint for you, which is a comprehensive planning tool tailored to your individual needs and retirement goals. To make an appointment, go to www.captrustadvice.com or call CAPTRUST directly at 800-967-9948.

Additional Resources

- UCF Human Resources Retirement Website: <http://hr.ucf.edu/current-employees/retirement/>
- How to change existing 403(b) contribution amounts: https://hr.ucf.edu/files/ESS_FLYER.pdf

Paid Time Off

Annual and Sick Leave

Paid time off and holiday benefits are determined by employee classification.

Classification	Annual Leave	Sick Leave
A&P, 12-Month Faculty & USPS Exempt	6.77 hours per pay period	4 hours per pay period
A&P Non-Exempt *Also eligible for (1) Personal Holiday per year & Bereavement Leave	6 hours per pay period	4 hours per pay period
Executive Service	9.195 hours per pay period	5 hours per pay period
9-Month Faculty	None	4 hours per pay period
USPS Non-Exempt *Also eligible for (1) Personal Holiday per year & Bereavement Leave	0-4 Years of Service: 4 hours per pay period 5-9 Years of Service: 5 hours per pay period 10+ Years of Service: 6 hours per pay period	4 hours per pay period
Post-Doctoral Associates	10 days per academic year	5 days per academic year
Phased Retirees	5 days per full time semester appointment *For former 12-Month Faculty	5 days per full-time semester appointment
Medical Residents: First Year	3 weeks per academic year *5 working days plus 2 weekend days	10 days per academic year
Medical Residents: All Other	3 weeks per academic year *5 working days plus 2 weekend days	10 days per academic year

Post-Doctoral Associates' and Phased Retirees' leave balances are tracked internally by the department in which they work.

Maximum Annual Leave Balance

Excess annual leave is converted to sick leave in the pay period containing January 1st of each year. There will be no retroactive adjustments.

Classification	Maximum Annual Leave Balance
A&P, 12-Month Faculty, USPS Exempt and USPS Exempt to Non-Exempt hired before 11/18/16	352 hours
Executive Service	480 hours
USPS Non-Exempt	240 hours

Leave Payouts

Upon retirement, termination, or if experiencing a classification change from 12-Month to 9-Month Faculty, permanent university employees are eligible to receive remaining leave balances paid out in a lump sum (net of taxes). The maximum hours payable are contingent upon their employment classification.

Classification	Leave Payout
A&P, 12-Month Faculty, USPS Exempt and USPS Exempt to Non-Exempt hired before 11/18/16	352 hours
Executive Service	480 hours
USPS Non-Exempt	240 hours

A regular employee (non-OPS) with 10+ continuous years of service is also eligible to receive a sick leave payout. The employee will be paid a number of hours equal to one quarter of their sick leave balance (not to exceed 480 hours).

Employees eligible to receive a leave payout may be subject to the UCF 401(a) Special Pay Plan (SPP). For additional information regarding the SPP, visit <https://hr.ucf.edu/files/SPP401a.pdf>.

Post-Doctoral Associates and Phased Retirees are not eligible for leave payouts, and any unused balances at the end of the academic year will be forfeited.

All USPS classes must attain regular status (come off probation) in order to be eligible for a leave payout.

Holidays

University of Central Florida Policy #2-002.2 recognizes specified days as university holidays. This policy applies to all regular employees and all departments, units, or divisions of the university. Regular employee is defined as any person employed by the university in a regular, benefits-earning position. This definition includes part-time personnel who work at least half-time on continuing appointments.

The university designates nine paid holidays annually for regular employees:

- New Year's Day: January 1
- Martin Luther King Jr.'s Birthday: Third Monday in January
- Memorial Day: Last Monday in May
- Independence Day: July 4
- Labor Day: First Monday in September
- Veterans Day: November 11
- Thanksgiving Day: Fourth Thursday in November
- Day after Thanksgiving: Fourth Friday in November
- Christmas Day: December 25

Designated holidays will be observed on the calendar days on which they fall. However, legal holidays occurring on Saturday will be observed on the preceding Friday and legal holidays occurring on Sunday will be observed on the following Monday.

Each year the Human Resources Department will publish a holiday schedule with the specific dates of holidays that will be observed.

For additional information regarding eligibility for holiday pay, visit <https://hr.ucf.edu/current-employees/leave-and-general-attendance-information/>.

Paid Personal Leave Days (Additional Days Off)

Aside from the nine holidays listed, additional paid personal leave days may be granted only by action of the President of the university. Although the vast majority of university offices are listed as closed during these days, certain employees may be deemed essential and will be required by the appropriate supervisor to work during the period of closure. For information regarding eligibility, visit <https://hr.ucf.edu/current-employees/leave-and-general-attendance-information/#paidpersonal>.

Personal Holiday

Each full-time A&P Non-Exempt and USPS Non-Exempt employee is entitled to one Personal Holiday each year. Each part-time A&P Non-Exempt and USPS Non-Exempt employee is entitled to a Personal Holiday each year, which shall be calculated proportionately to the Personal Holiday granted to a full-time employee. The Personal Holiday shall be credited to eligible employees on July 1 of each year and must be used by the employee or forfeited at the close of business on June 30 of the following year. The employee may not use the Personal Holiday before it is earned.

The hours granted for the Personal Holiday may not be used intermittently; the employee must use the entire 8 hours (or proportionate hours for a part-time employee) during a single work shift.

If the employee terminates before using the Personal Holiday, the Personal Holiday shall be forfeited, and the employee is not eligible for payment for the Personal Holiday upon termination.

Special Compensatory Leave for Police Benevolence Association (PBA) Employees

Special Compensatory Leave is defined as leave earned by a law enforcement officer filling a position in a non-exempt class and is provided as follows:

- To compensate an employee for a holiday when the employee observed the holiday and worked 40 hours during the week in which the holiday occurred; the holiday falls on the employee's regularly scheduled day off; or the employee is required to work on the holiday.
- To compensate an employee when he/she uses a personal holiday, and the hours worked plus the hours used for the personal holiday cause the employee's hours to exceed 40 during a work week.
- To compensate the employee for administrative leave for jury duty or court appearance when the employee worked 40 hours during the week in which the jury duty or court appearance occurred.
- To compensate the employee when he/she is required to perform essential duties during an emergency closing for the hours worked during the closing.

Special Compensatory Leave is not used with Paid Personal Leave Days that are granted by the President of the university.

There is no limit on the amount of Special Compensatory Leave a PBA employee may earn.

Additional Employee Benefits

Employee Assistance Program

The Employee Assistance Program (EAP) is a university-funded benefit that offers the support and resources you need to address any personal challenges and/or concerns that may affect your personal well-being and/or work performance. It is confidential and free to all employees (excluding OPS student employees) as well as their eligible family members, including spouses, dependent children, parents and parents-in-law.

HealthAdvocateSM

Benefits include:

- 24-hour emergency hotline
- In-person, telephonic or video counseling with licensed professional counselors for issues such as grief and loss, depression, relationship dynamics, divorce, job stress and burnout, addiction, eating disorders, mental illness, and more
- Six in-person visits per issue per year (including video counseling)
- Unlimited work/life service telephonic support for issues such as adoption, childcare, eldercare, financial and legal issues, identity theft, and more
- Medical Bill Saver which includes expert negotiators who assist with lowering medical bills

For additional information, visit <https://hr.ucf.edu/employeediscountsassistance/>.

Employee Discount Program (Pegasus Perks)

The University of Central Florida provides employees with an elite collection of local and national discounts from thousands of hotels, restaurants, movie theaters, retailers, florists, theme parks, national attractions, concerts, and events through Abenity. Discount offers are redeemable in-store through printable and mobile coupons, online, and over the phone. For additional information, visit <https://hr.ucf.edu/contentblock/employee-discount-programs/>.

Expectant Mother Parking Program

Faculty and staff permit holders in their third trimester of pregnancy (or high risk) may elect to reserve an expectant mother space in their permitted lot. For additional information, visit <https://hr.ucf.edu/expectant-mothers-parking-program/>.

Faculty & Staff Dining Plans

At UCF Dining, meal plans are convenient, flexible, and loaded with options. Meal plans give you dining locations across campus with a range of hours from as early as 7am to as late as midnight. For additional information, visit <https://ucf.campusdish.com/MealPlans/>.

Faculty & Staff Wellness Research Center

The Wellness Research Center (WRC) is a work-site wellness program for faculty and staff. Housed in the Education Building, this fitness center offers strength, flexibility, and aerobic conditioning equipment as well as fitness services. For additional information, visit <https://healthprofessions.ucf.edu/wrc/>.

Florida Pre-Paid College Plan

The University of Central Florida supports employee participation in the Florida Pre-Paid College Plan by offering payroll deductions to cover premiums each month. The plan allows you to select from options with specific costs, payment schedules, and benefits. Plans include two year, four year, and dormitory options. For additional information, visit <https://hr.ucf.edu/current-employees/florida-pre-paid-college-plan/>.

Leave of Absence Programs

For information regarding leave of absence policies that may be applicable to you, visit <https://hr.ucf.edu/leave-of-absence/#leaves-of-absence>.

Library Services

Multiple services are available to faculty and staff including borrowing privileges and teaching/research support. For additional information, visit <https://library.ucf.edu/services/>.

Lynda.com

Lynda.com, part of LinkedIn Learning, is a leading online learning platform that helps anyone learn business, software, technology, and creative skills to achieve personal and professional goals. Explore over 12,000 courses and 5,000 video tutorials from industry experts and leaders all in one place. Lynda.com is available to all UCF students, faculty, and staff. For more information, visit <https://digitallearning.ucf.edu/lynda/>.

Privacy Lactation Rooms

The University of Central Florida recognizes the needs of new mothers by providing lactation privacy rooms on campus. These secure locations provide UCF mothers, whether students, staff or faculty, the ability to ease back into work or school without having to sacrifice the healthy practice of expressing their milk. For additional information, visit <https://facultyexcellence.ucf.edu/center-for-success-of-women-faculty/>.

Public Service Loan Forgiveness Program

If you are employed by a government or not-for-profit organization such as UCF, you may be able to receive loan forgiveness under the Public Service Loan Forgiveness (PSLF) Program administered through the U.S. Department of Education. Visit <https://hr.ucf.edu/public-service-loan-forgiveness-program/> for additional information.

Recreation & Wellness Center

Employees of the University of Central Florida have an opportunity to purchase a discounted membership in the Recreation and Wellness Center. There are different memberships available to choose from, with most having promotional rates for new members. Visit <http://rwc.sdes.ucf.edu/memberships> for additional information.

SGA Ticket Center

The SGA Ticket Center offers specially-priced tickets to various local theme parks, attractions, movie theaters, and transportation providers. Tickets are intended for use only by UCF students, staff, and faculty. For additional information, visit <https://ticketcenter.sdes.ucf.edu/>.

Tuition Waiver Program

The University offers tuition assistance to eligible employees in the form of tuition waivers, good for up to six credit hours of coursework per semester. Eligible employees include A&P, Executive Service, USPS and Faculty, and courses are restricted to those taken at UCF. Contact the UCF Student Accounts department (407-823-2433) or visit <https://hr.ucf.edu/current-employees/tuition-waiver-program/> for additional information.

UCF School of Performing Arts: Discounted Tickets

The UCF School of Performing Arts offers a discounted rate for tickets and season subscriptions. A maximum of two tickets can be purchased at a time, and a valid UCF ID is required for purchase. The discounted rate can be accessed by calling the box office at 407-823-1500. Performance schedules and additional information regarding each production/concert can be found on the Performing Arts website: <http://performingarts.cah.ucf.edu/>.

UCF Technology Product Center Discounts

The Technology Product Center (TPC) offers various academic discounts on hardware and software. For additional information, visit <https://cstore.ucf.edu/>.

Additional Resources

- Additional Employee Benefits website: <https://hr.ucf.edu/additional-employee-benefits/>
- Health & Wellness Resources website: <https://hr.ucf.edu/health-wellness-resources/>

Other Important Information

9-Month Faculty Insurance Premium Deductions

All 9-month faculty members who are enrolled in insurance (health and any other supplemental plans) have double deductions taken from their paychecks beginning in February and ending with the first paycheck in May. The double deductions are necessary to pre-pay premiums for the months of June, July, August, and September. Regular deductions resume with the first paycheck in September.

Retirement contributions and spending accounts (FSA, HSA, etc.) are not impacted by the double deductions, as they are pro-rated based on the number of paychecks received in a calendar year. Retirement contributions continue for those who receive a paycheck in the summer.

Address Updates

If you move, remember that you must update your home and mailing address to ensure you receive timely and important information such as open enrollment information, insurance ID cards, etc. Employees may use the MyUCF portal (<https://my.ucf.edu>) to update their address via Employee Self Service. Employees may also submit an updated Personal Data Sheet (<https://hr.ucf.edu/files/PersonalDataSheet.pdf>) to update the same information as they would through the MyUCF portal.

IRS Reporting

Each year, UCF is required to furnish each full-time employee and part-time employee who was enrolled in the State Group Health Insurance Program with an IRS Form 1095. The Division of State Group Insurance will normally provide you with your individualized Form 1095 no later than January 31 to satisfy this requirement.

You may file your Individual Income Tax Return before receiving Form 1095. Unlike Form W-2, Form 1095 is strictly informational and is not attached to your income tax return. Form 1095 provides you with information about months that you (and your spouse and dependents, if any) were enrolled in the State Group Health Insurance Program. This information is important to provide you with evidence that you maintained a minimum level of health insurance coverage. Form 1095 also provides you with information about the State of Florida's offer of health insurance coverage to help you determine whether you are eligible for a premium tax credit if you purchased health insurance within the Healthcare Marketplace.

To elect to receive your Form 1095 electronically, go to the Contact Information section after logging into the People First website, and check the appropriate box to receive your 1095 electronically.

If you have questions about what to do with the form, please call your tax preparer. For other questions, visit www.irs.gov/ACA or https://www.mybenefits.myflorida.com/health/health_insurance_plans/health_insurance_mandates.

Contact Information

Name	Benefit	Telephone #	Website
Aetna	Health Insurance	877-858-6507	www.aetnastateflorida.com
AFLAC	Cancer & Intensive Care Insurance	800-780-3100	www.capitalins.com/plans/aflac-cancer-and-hospital-intensive-care
AIG (formerly VALIC)	SUSORP, 403(b) & 457 Provider	Local Rep Contact Info: https://hr.ucf.edu/current-employees/retirement/#retire1d	https://floridaorp.valic.com
Ameritas	Dental Insurance	877-721-2224	www.ameritas.com/group/olbc/florida
AvMed	Health Insurance	888-762-8633	www.avmed.org/web/state
Chard Snyder	Savings & Spending Accounts	855-824-9284	www.mybenefits.myflorida.com
Cigna	Hospitalization Insurance	800-780-3100	www.capitalins.com/plans/cigna-hospital-supplements
Cigna Dental	Dental Insurance	800-244-6224	www.capitalins.com/plans/cigna-dental-plan
Colonial Life	Accident, Cancer, & Disability Insurance	888-756-6701	www.visityouville.com/stateoffl
CVS Caremark	Prescription Drug Plan	888-766-5490	www.caremark.com/sofrxplan
Equitable (formerly AXA)	SUSORP Provider	866-401-3030	https://equitable.com/retirement/plan/401k-403b-457b/florida-orp-program
Fidelity	403(b) Provider	Local Rep Contact Info: https://hr.ucf.edu/current-employees/retirement/#retire1d	https://netbenefits.com/ucf
Florida Blue	Health Insurance	800-825-2583	www.floridablue.com/state-employees
Florida Retirement System (FRS)	Retirement Plans	844-377-1888	https://www.rol.frs.state.fl.us
Health Advocate	Employee Assistance Program (EAP)	877-240-6863	https://healthadvocate.com/members
Healthcare Bluebook	Shared Savings	800-513-6118	www.healthcarebluebook.com/cc/sof

Name	Benefit	Telephone #	Website
Humana	Dental Insurance	866-879-3630	www.humanadental.com/custom/fl/
Humana Vision	Vision Insurance	800-939-5369	www.compbenefits.com/custom/state-of-fla-vision/
MetLife	Dental Insurance	844-222-9104	www.metlife.com/stateoffl/
MetLife	SUSORP Provider	Local Rep Contact Info: https://hr.ucf.edu/current-employees/retirement/#retire1b	https://www.metlife.com/
New Era	Hospitalization Insurance	800-277-2300	www.ssc-life.com
People First	State of Florida Group Insurance Program Administrator	866-663-4735	https://peoplefirst.myflorida.com
Securian Financial	Life Insurance	888-826-2756	www.lifebenefits.com/florida
State of Florida MyBenefits	State of Florida Insurance Program	N/A	https://www.mybenefits.myflorida.com/
Sun Life	Dental Insurance (Indemnity w/ PPO)	800-442-7742	www.sunlife.com/us/Microsites/State+of+Florida
Sun Life	Dental Insurance (Prepaid)	800-443-2995	www.sunlife.com/us/Microsites/State+of+Florida
SurgeryPlus	Shared Savings	844-752-6170	https://Florida.surgeryplus.com
The Gabor Agency	Disability & Life Insurance	800-330-6115	http://www.gaboragency.com/schools/university-central-florida
TIAA	SUSORP & 403(b) Provider	Local Rep Contact Info: https://hr.ucf.edu/current-employees/retirement/#retire1d	https://www.tiaa.org/ucf
UnitedHealthcare	Health Insurance	877-614-0581	https://florida.welcometouhc.com/
VOYA	SUSORP Provider	Local Rep Contact Info: https://hr.ucf.edu/current-employees/retirement/#retire1b	https://floridaorp.beready2retire.com/

New Hire Enrollment Checklist

The purpose of this checklist is to be a helpful guide to assist you in making your enrollment selections. This does not take the place of enrollment; it is for your use only - do not submit to Human Resources.

Step 1

Within 60 days of hire - enroll in insurance via People First

Health Insurance	
<i>*Choose (1) option below</i>	
<input type="checkbox"/> HMO Standard	<input type="checkbox"/> PPO Standard
<input type="checkbox"/> HMO High Deductible Health Plan	<input type="checkbox"/> PPO High Deductible Health Plan
<input type="checkbox"/> Waive Coverage	
Additional Tasks (if applicable):	
<input type="checkbox"/> If Spouse Program option is elected, complete Spouse Program Election Form within 60 days of hire date.	
Spending & Saving Accounts	
<input type="checkbox"/> Health Savings Account (HSA) <i>*Only available with High Deductible Health Plan option</i> Additional Employee Contribution: \$ _____ <i>*UCF will contribute \$500/year for individual coverage & \$1,000/year for family coverage. Employees may contribute up to \$3,050/year for individual coverage and \$6,100/year for family.</i> <input type="checkbox"/> Waive Coverage	<input type="checkbox"/> Health Care Flexible Spending Account (FSA) Additional Employee Contribution: \$ _____ <i>*Annual Contribution Limit: \$2,750</i> <input type="checkbox"/> Waive Coverage
<input type="checkbox"/> Limited Purpose Flexible Spending Account (FSA) <i>*Only available with High Deductible Health Plan option with Health Savings Account (HSA) election</i> Additional Employee Contribution: \$ _____ <i>*Annual Contribution Limit: \$2,750</i> <input type="checkbox"/> Waive Coverage	<input type="checkbox"/> Dependent Care Flexible Spending Account (FSA) Additional Employee Contribution: \$ _____ <i>*Annual Contribution Limit: \$5,000</i> <input type="checkbox"/> Waive Coverage
Dental Insurance	
<i>*Choose (1) option below</i>	
Prepaid <input type="checkbox"/> CIGNA (People First Code 4034) <input type="checkbox"/> Sun Life Prepaid 225 (People First Code 4025) <input type="checkbox"/> Humana HD205 (People First Code 4044)	PPO <input type="checkbox"/> Ameritas Standard (People First Code 4022) <input type="checkbox"/> Ameritas Preventive (People First Code 4023) <input type="checkbox"/> MetLife Standard (People First Code 4032) <input type="checkbox"/> MetLife Preventive (People First Code 4033)
Indemnity w/ PPO <input type="checkbox"/> Ameritas (People First Code 4021) <input type="checkbox"/> Sun Life (People First Code 4074) <input type="checkbox"/> MetLife (People First Code 4031)	Indemnity <input type="checkbox"/> Humana Schedule B (People First Code 4084)
<input type="checkbox"/> Waive Coverage	

Vision Insurance
*Choose (1) option below

<input type="checkbox"/> Humana Vision Exam + Materials	<input type="checkbox"/> Waive Coverage
--	--

Life Insurance

<input type="checkbox"/> Basic Life Insurance <input type="checkbox"/> Waive Coverage <i>*Note: Full time regular employees are automatically enrolled in the \$25,000 basic life insurance paid by UCF.</i>	<input type="checkbox"/> Optional Life Insurance 1x, 2x, 3x, 4x, 5x, 6x, or 7x/Salary: _____ <i>*Maximum Benefit: \$1,000,000</i> <input type="checkbox"/> Waive Coverage
--	---

<input type="checkbox"/> Dependent Spouse Life Insurance <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$20,000 <input type="checkbox"/> Waive Coverage	<input type="checkbox"/> Dependent Child Life Insurance <input type="checkbox"/> \$10,000 <input type="checkbox"/> Waive Coverage
---	---

Other Supplemental Insurance

<input type="checkbox"/> Accident (<i>Colonial Insurance Company</i>) <input type="checkbox"/> Waive Coverage	<input type="checkbox"/> Cancer (<i>AFLAC via Capital Insurance Agency</i>) <input type="checkbox"/> Waive Coverage
--	--

<input type="checkbox"/> Disability (<i>Colonial Insurance Company</i>) <input type="checkbox"/> Waive Coverage	<input type="checkbox"/> Hospitalization (<i>CIGNA via Capital Insurance Agency</i>) <input type="checkbox"/> Waive Coverage
--	---

<input type="checkbox"/> Hospital Intensive Care (<i>AFLAC via Capital Insurance Agency</i>) <input type="checkbox"/> Waive Coverage

Additional Tasks (if applicable):

After People First enrollment, contact an agent to complete an application for your enrollment to be complete.

Step 2 ***Within 60 days of hire - enroll in benefits via The Gabor Agency***

<input type="checkbox"/> Life Insurance <input type="checkbox"/> Waive Coverage	<input type="checkbox"/> Disability Insurance <input type="checkbox"/> Waive Coverage
--	--

Step 3 ***Complete Mandatory Retirement Plan Enrollment***

State University System Optional Retirement Program (SUSORP) Enrollment Deadline: 90 Days from Hire Date

Florida Retirement System (FRS) Pension Plan Enrollment Deadline: Last Day of 8th Month Following Date of Hire

Florida Retirement System (FRS) Investment Plan Enrollment Deadline: Last Day of 8th Month Following Date of Hire

Mandatory Retirement Plans
*Choose (1) option below

<input type="checkbox"/> Florida Retirement System (FRS) Pension Plan <i>*Eligible: A&P, Executive Service, Faculty & USPS</i>	<input type="checkbox"/> Florida Retirement System (FRS) Investment Plan <i>*Eligible: A&P, Executive Service, Faculty & USPS</i>
--	---

<input type="checkbox"/> State University System Optional Retirement Program (SUSORP) <i>*Eligible: A&P, Executive Service & Faculty</i>
--

Step 4 ***Enroll in Voluntary Retirement Savings Plan (if interested)***

Voluntary Retirement Plans

<input type="checkbox"/> UCF 403(b) Plan <input type="checkbox"/> Waive	<input type="checkbox"/> Deferred Compensation 457(b) Plan <input type="checkbox"/> Waive
--	--



hr.ucf.edu



Human Resources

UNIVERSITY OF CENTRAL FLORIDA