2021 BENEFITS GUIDE

Your health, our promise.

Enroll online from October 20 to November 6, 2020.

hr.nd.edu/benefits

Bring out your champion
Benefits are a key part of your total rewards from Notre Dame. They are designed to address the holistic needs of you and your family. Along with take-home pay, paid time off, retirement benefits and tuition benefits, our comprehensive and competitive benefits are geared toward helping you address many aspects of your life.

As you prepare for open enrollment—which starts on October 20 and ends on November 6—remember, this is your annual opportunity to re-evaluate your needs and decide which benefit options best support you in the year ahead. If you want to make changes, you can do that anytime between October 20 and November 6.

Your Well-being for Life

Our annual benefits enrollment period is a good reminder of how much we value your overall health and well-being. We consider our faculty and staff to be an important part of the Notre Dame family. To help you live your best, we offer the Well-being for Life program with several multi-faceted resources to help with your emotional, physical, financial, social and spiritual well-being.

One of our newest resources is emotional well-being services at the Notre Dame Wellness Center. More information about the Well-being for Life program can be found in the enclosed benefit statement and at hr.nd.edu/well-being-toolkit.
Open enrollment is October 20 to November 6. **Most of your benefit selections will roll forward.**

If you want to change any benefit selections for 2021, you must complete online enrollment by the deadline.

If you are currently enrolled in the HDHP plan with HRA, you will be defaulted to the HSA plan in 2021, unless you make a different election.

We are here to help you achieve well-being for life.

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To learn more, visit [hr.nd.edu/benefits](http://hr.nd.edu/benefits)

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*You must re-enroll each year in Flexible Spending Accounts.*
MEDICAL PLANS

Benefit-eligible faculty and staff may choose from two medical plans. The plan you choose determines how much you pay for services and how much the plan pays.

Exceptional Care, Close to You.

Both Notre Dame medical plans offer 100% preventive care and access to a vast network of Anthem providers.

Anthem HSA
- Lowest monthly premiums and highest deductible, with you paying the full cost of services until you meet the deductible
- Includes HSA*, individual accident insurance and critical illness insurance
- Notre Dame HSA contribution: $500 for individual coverage, $1,000 for +1 or family coverage

Anthem PPO
- Highest monthly premium and lowest deductibles and out-of-pocket maximums
- Copays and coinsurance for some services

MONTHLY MEDICAL PREMIUMS

<table>
<thead>
<tr>
<th></th>
<th>ANTHEM HSA</th>
<th>ANTHEM PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With Employee Screening*</td>
<td>With Employee + Spouse Screening*</td>
</tr>
<tr>
<td>Individual</td>
<td>$45</td>
<td>-</td>
</tr>
<tr>
<td>Individual + 1</td>
<td>$145</td>
<td>$137</td>
</tr>
<tr>
<td>Family</td>
<td>$186</td>
<td>$178</td>
</tr>
</tbody>
</table>

* If you are a Medicare A participant or have any other medical coverage, you are not eligible for a Health Savings Account (HSA).
** Only faculty/staff and spouses are eligible for health screenings.

Health Screenings

Due to the pandemic, we have made changes to our annual biometric health screenings program.

If you or your benefit-eligible spouse completed a biometric health screening in 2019, you will automatically receive a premium credit towards 2021. There is no need for you or your spouse to complete one this year.

If you did not complete a confidential biometric health screening in 2019, you and your eligible spouse will have the opportunity to complete one and earn the premium credits towards 2021.
## MEDICAL PLAN OVERVIEW

Use Ask ALEX to help decide which plan is best for you and your family. Learn more at: [myalex.com/NotreDame/2021](http://myalex.com/NotreDame/2021)

<table>
<thead>
<tr>
<th></th>
<th>HSA</th>
<th>PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Preventive Care</strong></td>
<td>100%, no deductible</td>
<td>100%, no deductible</td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-Network</td>
<td>$2,000 individual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$3,750 true family</td>
<td>$500 individual</td>
</tr>
<tr>
<td></td>
<td>$1,000 family</td>
<td>$1,000 individual</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td>$4,000 individual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$7,500 true family</td>
<td>$1,000 individual</td>
</tr>
<tr>
<td></td>
<td>$2,000 individual</td>
<td></td>
</tr>
<tr>
<td><strong>Coinsurance</strong></td>
<td>85%</td>
<td>85%</td>
</tr>
<tr>
<td>(plan pays after</td>
<td></td>
<td></td>
</tr>
<tr>
<td>deductible is met)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-Network</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$3,000 individual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$6,200 family</td>
<td>$3,000 individual</td>
</tr>
<tr>
<td></td>
<td>$6,000 family</td>
<td>$6,000 family</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$6,000 individual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$12,400 family</td>
<td>$6,000 individual</td>
</tr>
<tr>
<td></td>
<td>$12,000 family</td>
<td>$12,000 family</td>
</tr>
<tr>
<td><strong>Out-of-Pocket</strong></td>
<td>$6,000 individual</td>
<td>$6,000 individual</td>
</tr>
<tr>
<td><strong>Primary Care</strong></td>
<td>$12,400 family</td>
<td>$12,000 family</td>
</tr>
<tr>
<td>In-Network</td>
<td>Actual cost of service until</td>
<td>Actual cost of service until</td>
</tr>
<tr>
<td></td>
<td>deductible met, then plan pays 85%</td>
<td>deductible met, then plan pays 65% of usual and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>customary</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td>Actual cost of service until</td>
<td>Actual cost of service until</td>
</tr>
<tr>
<td></td>
<td>deductible met, then plan pays 65%</td>
<td>deductible met, then plan pays 65% of usual and</td>
</tr>
<tr>
<td></td>
<td>of usual and customary</td>
<td>customary</td>
</tr>
<tr>
<td><strong>Specialist</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-Network</td>
<td>Actual cost of service until</td>
<td>100% after $35 copay</td>
</tr>
<tr>
<td></td>
<td>deductible met, then plan pays 85%</td>
<td>per physician office visit</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td>Actual cost of service until</td>
<td>Actual cost of service until</td>
</tr>
<tr>
<td></td>
<td>deductible met, then plan pays 65%</td>
<td>deductible met, then plan pays 65% of usual and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>customary</td>
</tr>
<tr>
<td><strong>Urgent Care In-Network</strong></td>
<td>Actual cost of service until deductible met, then plan pays 85%*</td>
<td>$50*</td>
</tr>
<tr>
<td><strong>Wellness Center Office Visit</strong></td>
<td>$30 access fee + actual cost of services (i.e. labs) until deductible met</td>
<td>$15</td>
</tr>
<tr>
<td><strong>Lifetime Maximum</strong></td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td><strong>Notre Dame Contributions to Funding Account</strong></td>
<td>Health Savings Account $500 individual $1,000 +1 or family</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Includes Accident Insurance</strong></td>
<td>Individual coverage only</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Includes Critical Illness Insurance</strong></td>
<td>$5,000 individual coverage</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Immediate and primary care are also available at the Notre Dame Wellness Center, with a $15 copay for PPO medical plan, and $30 for HSA plan.

** For more information on accident insurance, including rates and information on adding additional coverage for yourself or your dependents, see page 14.

*** For more information on critical illness insurance, including rates and information on adding additional coverage for yourself or your dependents, see page 15.
Everyone enrolled in a Notre Dame medical plan automatically receives prescription drug coverage. The University’s prescription plan administrator is OptumRx.

Keeping You Well.

PRESCRIPTION DRUGS

Two Ways to Fill a Prescription

- **Retail Pharmacies**: Fill short-term (30 days or less) prescriptions at any in-network pharmacy.
- **Mail Order**: Long-term (over 30 days) prescriptions must be filled by mail or at the Wellness Center pharmacy.

Prescription Reminder

The Notre Dame Wellness Center pharmacy is an exception to the mail-order rule: 90-day prescriptions may be filled for the same copays as mail order prescriptions.

NEW! Dispense As Written Rule

If there is a generic option available for your prescription and you opt for the brand-name drug instead, you are responsible for the difference in cost between the brand and the generic versions.

PRESCRIPTION RATES

<table>
<thead>
<tr>
<th></th>
<th>Retail</th>
<th>Mail Order</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic Drugs</td>
<td>$5</td>
<td>$12</td>
</tr>
<tr>
<td>Preferred Brand-name Drugs</td>
<td>$40</td>
<td>$80</td>
</tr>
<tr>
<td>Non-preferred Brand-name Drugs</td>
<td>$55</td>
<td>$110</td>
</tr>
<tr>
<td>Specialty Drugs</td>
<td>$100</td>
<td>$200</td>
</tr>
</tbody>
</table>

Note: If you enroll in the Anthem HSA plan, you must meet your deductible before prescription copays apply.
WAYS TO SAVE $$$

While it’s easy to focus on the cost of healthcare, there are several ways you can save, too!

Making the Most of Your Healthcare Dollars.

Choose your care wisely.
The medical care you choose can have a significant financial impact—and literally may mean a difference of hundreds of dollars. You can also consider generic prescriptions—they contain the same active/key ingredients as brand name drugs and are a lot less expensive.

Take advantage of free preventive care.
Get an annual physical and other preventive screenings that can detect problems before they become serious.

Take steps to manage chronic illnesses.
Chronic conditions are less complex and costly when effectively managed. Your healthcare provider can help you find the right resources.

Virtual Irish Health

Irish Health is moving from an onsite benefits fair to a 24/7 virtual experience, providing you with:

More information - from our benefit program vendors and campus partners
More accessibility - log on when your schedule permits, any time of the day or night, for the entire Open Enrollment period
More engagement - live and on-demand educational sessions will be available
More family participation - spouses and other family members are welcome to join

Visit at least five booths and you will be entered to win a cash prize of $750, $500 or $250!

SAVE THE DATE
October 20 - November 6, 2020
Live vendor chats and presentations
October 20 - 21

Starting October 20, visit bit.ly/virtualirishhealth to register and learn more.
FUNDING ACCOUNTS

We provide ways for you to set aside money for healthcare expenses by offering Health Savings Accounts (HSAs), Flexible Spending Accounts (FSAs) and Limited Purpose FSAs (LPFSAs).

Funding Your Healthcare, Made Easy.

Health Savings Account (HSA)
- Tied to the Anthem HSA medical plan
- University contribution of $500 (individual)/$1,000 (+1 or family) to help you pay for medical expenses
- Triple tax savings – contributions, earnings and distributions are tax-free when used to pay for qualified medical expenses
- Employee pre-tax contributions allowed and money is always yours. Use your savings for expenses now or invest them for future use, including during retirement
- Debit card available through Fidelity
- Compatible with Limited Purpose FSA

Flexible Spending Account (FSA)
- Employee pre-tax contribution of up to $2,750 for medical, dental and vision expenses
- Rx claims will now automatically flow to FSA accounts for reimbursement through the anthem.com portal

Limited Purpose Flexible Spending Account (LPFSA)
- Employee pre-tax contributions for dental and vision expenses only

Dependent Care FSA
- Employee pre-tax contribution for dependent care services while you and your spouse work
- Eligible expenses include traditional daycare, latch-key programs, day camps (for children under age 13) and elder care

Annual Maximum Contribution Limits

$3,600/$7,200
Healthcare Savings Account
individual/family maximums

$2,750*
Healthcare and Limited Purpose FSA maximums

$5,000*
Dependent Care FSA maximum

*2020 limit. Federal limit for 2021 was not released at the time of publication.
## FUNDING ACCOUNT COMPARISON

<table>
<thead>
<tr>
<th></th>
<th>HSA</th>
<th>FSA</th>
<th>LPFSA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical Plan</strong></td>
<td>Anthem HSA</td>
<td>Anthem PPO</td>
<td>Anthem HSA</td>
</tr>
<tr>
<td><strong>Who Funds</strong></td>
<td>University and you</td>
<td>You</td>
<td>You</td>
</tr>
<tr>
<td><strong>University Contribution</strong></td>
<td>$500 (individual), $1,000 (+1 or family)</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>IRS Limits</strong></td>
<td>$3,600 individual, $7,200 family</td>
<td>$2,750*</td>
<td>$2,750*</td>
</tr>
<tr>
<td><strong>Unused Money Rolls Forward to Next Year</strong></td>
<td>Yes</td>
<td>No. Unused money only rolls forward to March 31, 2022</td>
<td>No. Unused money only rolls forward to March 31, 2022</td>
</tr>
<tr>
<td><strong>What Funds Are Used For</strong></td>
<td>Eligible medical expenses + dental and vision expenses</td>
<td>Eligible medical expenses + dental and vision expenses</td>
<td>Eligible dental and vision expenses</td>
</tr>
<tr>
<td><strong>Portable</strong></td>
<td>Yes. Unused funds are yours to keep.</td>
<td>No. Unused money forfeited if you leave Notre Dame</td>
<td>No. Unused money forfeited if you leave Notre Dame</td>
</tr>
<tr>
<td><strong>Tax Benefit</strong></td>
<td>Tax-free dollars, does not count as income</td>
<td>Pre-tax contributions, taxes may be reduced</td>
<td>Pre-tax contributions, taxes may be reduced</td>
</tr>
<tr>
<td><strong>Can Be Invested</strong></td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

*2020 limit. Federal limit for 2021 was not released at the time of publication.
Notre Dame Wellness Center

The Wellness Center is a great option for basic healthcare and is open to all benefit-eligible faculty and staff, their spouses and dependents on our plans. Those enrolled in the PPO plan can access services at the Wellness Center for a $15 flat fee. Those enrolled in the HSA plan can schedule an office visit for just $30.

Wellness Center Services
- Primary and Preventive Care
- Immediate “Walk-in” Care
- Lab Services
- Physical Therapy
- Wellness Coaching
- Chronic Condition Management
- NEW! Onsite Emotional Well-being Services

Your Well-being for Life
We care about your overall health and well-being, and have several programs and resources in place to help you with your emotional, physical, financial, social and spiritual well-being.

Who Can Use the Wellness Center?
- All full-time, benefit-eligible faculty and staff, spouses and dependents may visit the Notre Dame Wellness Center. Benefit-eligible faculty and staff who waive University healthcare coverage may still use the Wellness Center. The University of Notre Dame has no access to personal health information obtained by the Notre Dame Wellness Center.

<table>
<thead>
<tr>
<th></th>
<th>ANTHEM HSA</th>
<th>ANTHEM PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit</td>
<td>$30</td>
<td>$15</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>$30</td>
<td>$15</td>
</tr>
<tr>
<td>Labs</td>
<td>Deductible/coinsurance</td>
<td>$0</td>
</tr>
<tr>
<td>Prescription</td>
<td>Deductible/copay</td>
<td>Copay</td>
</tr>
<tr>
<td>Wellness Coaching</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

For a full list of services, visit: notredame wellnesscenter.com
The University offers two dental plan options through Delta Dental. Both plans allow you to choose any licensed dentist for your care.

A Reason To Smile.

"If you enroll in a Delta Dental plan, you must remain enrolled for two years. You may switch between the two plans during open enrollment or when you have a qualifying event, such as a birth or marriage.

**DELTA PREMIER**
- Lower monthly premiums in exchange for lower coverage and a lower annual maximum

**DELTA PPO POS**
- Higher percentage of basic services, with a higher annual maximum

<table>
<thead>
<tr>
<th>Network</th>
<th>Delta Premier</th>
<th>Other Dentists</th>
<th>Delta PPO POS</th>
<th>Delta Premier/ Other Dentists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductibles</td>
<td>$50 individual/$150 family</td>
<td>100% of usual and customary</td>
<td>$50 individual/$150 family</td>
<td>100% of usual and customary</td>
</tr>
<tr>
<td>Diagnostic and Preventive</td>
<td>100%</td>
<td>100% of usual and customary</td>
<td>100%</td>
<td>100% of usual and customary</td>
</tr>
<tr>
<td>Basic Services</td>
<td>50% (after deductible)</td>
<td>50% of usual and customary (after deductible)</td>
<td>80% (after deductible)</td>
<td>50% of usual and customary (after deductible)</td>
</tr>
<tr>
<td>Major Services</td>
<td>$1,000 per person, per year</td>
<td>$1,500 per person, per year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthodontics</td>
<td>50% maximum lifetime benefit of $1,500</td>
<td>50% maximum lifetime benefit of $1,500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Periodontics</td>
<td>50%</td>
<td>80%</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Endodontic</td>
<td>50%</td>
<td>80%</td>
<td>50%</td>
<td></td>
</tr>
</tbody>
</table>

Paid at usual and customary: A usual and customary fee is the amount that your dental plan determines is the normal range of payment for a specific service within a given geographic area.

"When using a non-participating dentist, Delta Dental will reimburse you and not the dentist. This document is intended as a supplement to your Dental Care Certificate and Summary of Dental Plan Benefits. Please refer to your certificate and summary for policy exclusions and limitations.

Directory and list of covered services: deltadentalin.com
Eligibility claims or reimbursements: toolkitsonline.com
The University’s vision benefit program is provided by EyeMed. The program offers significant savings on eye exams, frames, corrective lenses and laser vision correction.

**Your Vision Is Our Focus.**

### Choice of providers
You can see the vision provider of your choice, however, you’ll receive discounted pricing from optometrists and opticians in the EyeMed network. These include:

- Independent optometrists, ophthalmologists and opticians
- Retail providers like LensCrafters, Pearle Vision, Target

**Note:** Claim forms are not required for services from participating providers, but may be submitted for reimbursement (up to plan maximum) for some services received from non-participating providers.

### VISION PLAN RATES

<table>
<thead>
<tr>
<th></th>
<th>MEMBER COST</th>
<th>OUT-OF-NETWORK ALLOWANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam with Dilation</td>
<td>$0</td>
<td>Up to $35</td>
</tr>
<tr>
<td>Frames</td>
<td>$0 copay, plus 20% off balance over $150</td>
<td>Up to $65</td>
</tr>
<tr>
<td>Standard Plastic Lenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>$10 copay</td>
<td>Up to $25</td>
</tr>
<tr>
<td>Bifocal</td>
<td>$10 copay</td>
<td>Up to $40</td>
</tr>
<tr>
<td>Trifocal</td>
<td>$10 copay</td>
<td>Up to $55</td>
</tr>
<tr>
<td>Progressive Lens (Standard)</td>
<td>$75 copay</td>
<td>Up to $40</td>
</tr>
<tr>
<td>Contact Lenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fit and Follow-up (Standard)</td>
<td>Up to $40</td>
<td>N/A</td>
</tr>
<tr>
<td>Fit and Follow-up (Premium)</td>
<td>10% off retail price</td>
<td>N/A</td>
</tr>
<tr>
<td>Conventional</td>
<td>$0 copay, plus 15% off balance over $130</td>
<td>Up to $104</td>
</tr>
<tr>
<td>Disposables</td>
<td>$0 copay, plus balance over $130</td>
<td>Up to $104</td>
</tr>
</tbody>
</table>

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Summary of benefits:
[hr.nd.edu/benefits](http://hr.nd.edu/benefits)

EyeMed directory:
[eyemedvisioncare.com](http://eyemedvisioncare.com)

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*The vision plan covers either glasses or contacts annually, but not both.*
LIFE INSURANCE

Plan coverage options and rates remain the same—giving you a convenient, affordable way to protect the financial future of your loved ones.

Planning for Tomorrow … Today.

Base Life Insurance
- Coverage of $25,000 to all benefit-eligible, full-time faculty and staff
- Provided free by the University
- No enrollment is required
- Check or update your beneficiaries

Supplemental Life Insurance
- Supplement to University-provided coverage
- 1 to 10 times your salary, up to $1.5M
- Evidence of Insurability may be required
- Enrollment required
- At age 65+, coverage amount becomes percentage of the amount of prior coverage

<table>
<thead>
<tr>
<th>Your Age</th>
<th>Amount of Insurance as a Percentage of Amount Before 65</th>
</tr>
</thead>
<tbody>
<tr>
<td>65-69</td>
<td>65% of pre-65 amount</td>
</tr>
<tr>
<td>70-74</td>
<td>50% of pre-65 amount</td>
</tr>
<tr>
<td>75+</td>
<td>25% of pre-65 amount</td>
</tr>
</tbody>
</table>

Dependent Life Insurance
- Coverage for your spouse and dependent children (under age 26)
- Evidence of Insurability may be required
- Enrollment required, premiums paid by payroll deduction
- Coverage options: Spouse $12,500/$25,000; Child(ren) $5,000/10,000

When both spouses work at Notre Dame
A spouse, also employed at the University and eligible for base and supplemental life insurance, is not eligible for coverage under dependent life. Additionally, either one, but not both, may insure their children.

Evidence of Insurability
Evidence of Insurability (EOI) certifies the insured’s health status and discloses prior conditions or hospitalizations. EOI may be required if you increase coverage above a certain amount, are electing coverage for the first time, or had previously canceled coverage.

Securian Financial: securian.com
Life insurance rates & EOI form: MyBenefits.nd.edu
ACCIDENT INSURANCE

To learn more, visit hr.nd.edu/benefits

Accident insurance is provided by Securian Financial and is available to all benefit-eligible faculty and staff.

Invest in Peace of Mind.

Securian Financial

- Payment directly to you if you or a covered family member dies or suffers a serious injury in an accident
- Covers out-of-pocket expenses, such as hospital/emergency room care, injuries requiring surgery, ambulance fees, physical therapy, recovery, income and family lodging
- Individual coverage included at no cost with Anthem HSA enrollment

When both spouses work at Notre Dame

If both you and your spouse are benefit-eligible University employees, either one of you (not both) may choose individual +1 or family coverage. Additionally, only one of you may cover dependent children.

PLAN RATES

<table>
<thead>
<tr>
<th></th>
<th>2020 Monthly Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$5.52</td>
</tr>
<tr>
<td>Individual + 1</td>
<td>$8.68</td>
</tr>
<tr>
<td>Family</td>
<td>$15.84</td>
</tr>
</tbody>
</table>

Benefits reductions to AD&D coverage: 25% at age 65; 50% at age 70.

BENEFIT PAYOUT

| Daily Hospital Limit         | $100 per day (non-ICU); $200 per day (ICU) |
| Emergency Room Treatment     | Up to $50                                     |
| Ambulance (Ground/Air)       | $200/$750                                     |
| Appliance                    | Up to $250                                     |
| Physical Therapy             | $100 per day (inpatient); $300 lump sum (outpatient) |

Fractures

- Varies based on type of fracture
- Up to $3,000 (surgical); up to $1,500 (non-surgical)
- Chip fractures: up to $375

Dislocations

- Varies based on type of dislocation
- Up to $3,000 (surgical); up to $1,500 (non-surgical)

AD&D (employee)

- Up to $25,000
- 3 times for death on common carrier

Other Benefits

- Blood, plasma, platelets; emergency dental; burns, skin graft, lacerations; coma; concussion; eye injury; hospital rehabilitation; inpatient surgery; lodging; medical testing; pain management; prosthetic device; tendon, ligament, rotator cuff, ruptured disc; therapy services; torn knee cartilage; transportation

Securian Financial: securian.com
Critical illness insurance is provided by Securian Financial

Serious Medicine, Extra Care.

Securian Financial

- Lump-sum payment when diagnosed with critical illnesses like heart attack, stroke, organ failure, cancer, Alzheimer’s disease, etc.
- Payment may be used for medical expenses or other living expenses (child care, transportation, special medical equipment, etc.)

When both spouses work at Notre Dame

If both you and your spouse are benefit-eligible University employees, either one of you (not both) may choose individual +1 or family coverage. Additionally, only one of you may cover dependent children.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Initial Benefit</th>
<th>Recurrence Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Benefit Cancer</td>
<td>100% of initial benefit</td>
<td>50% of initial benefit</td>
</tr>
<tr>
<td>Partial Benefit Cancer</td>
<td>25% of initial benefit</td>
<td>25% of initial benefit</td>
</tr>
<tr>
<td>Heart Attack</td>
<td>100% of initial benefit</td>
<td>50% of initial benefit</td>
</tr>
<tr>
<td>Stroke</td>
<td>100% of initial benefit</td>
<td>50% of initial benefit</td>
</tr>
<tr>
<td>Coronary Artery Disease Needing Surgery</td>
<td>100% of initial benefit</td>
<td>50% of initial benefit</td>
</tr>
<tr>
<td>Kidney Failure</td>
<td>100% of initial benefit</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Alzheimer’s Disease</td>
<td>100% of initial benefit</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Major Organ Failure</td>
<td>100% of initial benefit</td>
<td>50% of initial benefit</td>
</tr>
<tr>
<td>Additional Covered Illnesses*</td>
<td>25% of initial benefit</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

*Additional covered illnesses include: Addison’s disease; ALS (Lou Gehrig’s disease); benign brain tumor; cerebrospinal meningitis (bacterial); cerebral palsy; Creutzfeldt-Jacob Disease; cystic fibrosis; encephalitis; Legionnaire’s disease; multiple sclerosis (definitive diagnosis); muscular dystrophy; myasthenia gravis; necrotizing fasciitis; occupational HIV; osteomyelitis; poliomyelitis; rabies; sickle cell anemia (excluding sickle cell trait); systemic lupus erythematosus (SLE); and systemic sclerosis (scleroderma).
Open enrollment is October 20 to November 6, 2020. Your benefit selections will roll forward. If you want to change any benefit selections for 2021, you must complete online enrollment by the deadline.

Easy as 1-2-3.

1. DECIDE WHAT BENEFITS YOU WANT

☐ Get Informed! You can review benefit information at Virtual Irish Health and AskAlex.

☐ Medical Plan: Which plan best suits your needs: Anthem HSA or Anthem PPO? Remember, if you are currently enrolled in the HDHP/HRA plan, you will be defaulted to the HSA plan, unless you make a different election.

☐ HSA: Should you contribute tax-free dollars for healthcare expenses? If so, how much?

☐ Dental: Do you want basic or more comprehensive coverage?

☐ Vision: Would you like coverage for eye care or corrective lenses?

☐ Flexible Spending or Limited Purpose Flexible Spending Accounts: Do you want to set aside tax-free dollars for healthcare, dental, vision or dependent care expenses? If so, how much?

☐ Life Insurance: Would you like more than the base coverage provided?

☐ Voluntary Benefits: Are there any optional benefits like accident or critical illness insurance that you want?

2. GATHER YOUR INFORMATION

☐ Your netID and password

☐ Full legal name, date of birth and Social Security number of dependents

☐ Name and address of your life insurance beneficiaries

3. ENROLL ONLINE AT MYBENEFITS.ND.EDU

Enroll anytime between October 20 and November 6, 2020.
ENROLLING NEW DEPENDENTS

If you are adding a spouse or new dependent, you are required to provide documentation to verify the dependent’s relationship to you. You must submit the documentation via MyBenefits.nd.edu no later than December 4. Scans or legible photos of the documents are acceptable.

IMPORTANT: If documentation is not provided by the deadline, the spouse or dependent will not be enrolled. See hr.nd.edu/benefits/verify for more information on the required documentation.

<table>
<thead>
<tr>
<th>KEY DATES</th>
<th>BENEFITS ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Now – November 6</td>
<td>Health Screenings available at Beacon Health &amp; Fitness</td>
</tr>
<tr>
<td>October 20 – November 6</td>
<td>Open enrollment via MyBenefits.nd.edu</td>
</tr>
<tr>
<td>October 20 – November 6</td>
<td>Virtual Irish Health</td>
</tr>
<tr>
<td>October 20 – 21</td>
<td>Virtual Irish Health live chats and presentations</td>
</tr>
<tr>
<td>November 6:</td>
<td>Last day of open enrollment</td>
</tr>
<tr>
<td>November 16</td>
<td>Confirmation statements available at MyBenefits.nd.edu</td>
</tr>
<tr>
<td>November 25</td>
<td>Last day to submit enrollment corrections to <a href="mailto:askHR@nd.edu">askHR@nd.edu</a></td>
</tr>
<tr>
<td>December 4</td>
<td>Last day to submit eligibility documentation for newly enrolled spouse or dependents in MyBenefits.nd.edu</td>
</tr>
<tr>
<td>January 1, 2021</td>
<td>2021 benefit elections take effect</td>
</tr>
</tbody>
</table>

What is a qualifying event?

Certain life events may require changes to your benefits, such as marriage, divorce or loss of a dependent’s eligibility. If you experience an event that qualifies, then you may submit changes to your benefits in MyBenefits within 30 days from the date of the event. See a full list of qualifying events at hr.nd.edu/benefits.
NOTICES

SPECIAL ENROLLMENT NOTICE

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents’ other coverage). However, you must request enrollment within 30 days after your or your dependents’ other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren’t already enrolled. This is called a “special enrollment” opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2019. Contact your State for more information on eligibility:

**CALIFORNIA – Medicaid**
https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_cont.aspx
Phone: 916-440-5676

**FLORIDA – Medicaid**
http://fmedicaidprecovery.com/hipp/
Phone: 1-877-357-3268

**GEORGIA – Medicaid**
http://dhc.georgia.gov/medicaid
Click on Health Insurance Premium Payment (HIPP)
Phone: 404-656-4507

**INDIANA – Medicaid**
Healthy Indiana Plan for low-income adults
19-64
http://www.in.gov/fssa/hip/
Phone: 1-877-438-4479
All other Medicaid
http://www.indianamedicaid.com
Phone: 1-800-403-0864

**MINNESOTA – Medicaid**
https://mn.gov/dhs/services/other-insurance.jsp
Phone: 1-800-657-3739

**NEW JERSEY – Medicaid**
http://www.state.nj.us/humanservices/dmahs/cfmedicaid/
Medicaid Phone: 609-631-2392
CHIP Website: http://www.njfamilycare.org/index.html
CHIP Phone: 1-800-701-0710

**NEW YORK – Medicaid**
https://www.health.ny.gov/health_care/medicaid/
Phone: 1-800-541-2831

**NORTH CAROLINA – Medicaid**
https://dma.ncdhhs.gov/
Phone: 919-855-4100

**PENNSYLVANIA – Medicaid**
Phone: 1-800-692-7462

**TEXAS – Medicaid**
http://gethipptexas.com/
Phone: 1-800-440-0493

**WISCONSIN – Medicaid**
Phone: 1-800-362-3002
To see if any other states have added a premium assistance program since July 31, 2019, or for more information on special enrollment rights, contact either:

- U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

- U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.
The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.

**NOTICE REGARDING WELLNESS SCREENING**

The Notre Dame Health Screening is a voluntary wellness program available to all full time employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate you must complete a biometric screening, which will include a blood test for the markers of diabetes and hypertension. **You are not required to participate in the screening.**

However, employees who choose to participate in the screening will receive an incentive in the form of a medical plan premium reduction of $180 spread out over the course of a year, and an employee whose spouse completes the screening will receive a reduction of an additional $96 in medical plan premium over the year.

The results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as no cost visits with a Wellness Coach or Chronic Condition Nurse. You also are encouraged to share your results or concerns with your own doctor.

**Protections from Disclosure of Medical Information**

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and The University of Notre Dame may use aggregate information it collects to design a program based on identified health risks in the workplace, the administrators of the screening will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program; or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information are the staff of the Notre Dame Wellness Center, administered by the third party, Premise Health, in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the askHR helpdesk at (574) 631-5900.

**WOMEN’S HEALTH & CANCER RIGHTS ACT ENROLLMENT NOTICE**

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women’s Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient for:

- All stages of reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and co-insurance applicable to other medical and surgical benefits provided under this plan.

**NOTICE OF AVAILABILITY OF HIPAA NOTICE OF PRIVACY PRACTICES**

The Privacy Rule under The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires health plans to remind covered participants of the availability of the Privacy Notice and how they can obtain it.

The Notice of Privacy Practices for the University of Notre Dame’s Group Benefits Plan describes the uses and disclosures of your protected health information and your rights regarding them.

A copy of The Notice of Privacy Practices for the University of Notre Dame’s Group Benefits Plan can be obtained by:

- Visiting the Human Resources website at: hr.nd.edu/nd-faculty-staff/fed/
- Contacting askHR at 574-631-5900 or emailing askHR at askhr@nd.edu
- Visiting the Office of Human Resources, Grace Hall, Second floor
# CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Provider</th>
<th>Phone Number</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical</strong></td>
<td>Anthem</td>
<td>833-835-2717</td>
<td><a href="http://anthem.com">anthem.com</a></td>
</tr>
</tbody>
</table>
| **Prescription Drug**                | OptumRX               | 866-270-0234          | [optumrx.com](http://optumrx.com) /
|                                      |                       |                       | [mycatamaranrx](http://mycatamaranrx) |
| **Dental**                           | Delta Dental          | 800-524-0149          | [deltadentalin.com](http://deltadentalin.com) |
| **Vision**                           | EyeMed                | 866-800-5457          | [eyemedvisioncare.com](http://eyemedvisioncare.com) |
| **Life Insurance / Accident Insurance / Critical Illness Insurance** | Securian Financial | 800-843-8358          | [securian.com](http://securian.com) |
| **Flexible Spending Accounts**       | Anthem                | 833-835-2717          | [anthem.com](http://anthem.com) |
| **Health Advocate**                  | Health Advocate       | 866-695-8622          | [healthadvocate.com](http://healthadvocate.com) |
| **Wellness Center**                  | Wellness Center       | 574-634-WELL          | [notredame wellnesscenter.com](http://notredame wellnesscenter.com) |
|                                      |                       | COVID Direct Number: 574-631-0050 | |

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**MyBenefits.nd.edu**

**Enroll October 20 – November 6, 2020**

- askHR@nd.edu  574-631-5900
- hr.nd.edu/benefits  200 Grace Hall

Bring out your champion