



Candidate
Benefit Options
&
Eligibility

2025 Calendar Year

Employee Eligibility:

All faculty and staff employees who work an average of 40 hours per week are eligible to receive group health insurance and ancillary benefits. Faculty and staff employees who work on average 30 or more hours of service per week are eligible to receive ACA group health insurance benefits.

Dependent Eligibility:

Dependent eligibility for coverage is available if an employee is insured. Eligible dependents may be your legal spouse and/or legal dependent children.

Spouses:

A spouse is defined as an individual who is lawfully married to another individual. Spouses are subject to the working spouse rule, which mandates that if a spouse has access to employer subsidized (at least 50%) medical, prescription drug, and dental insurance they will need to enroll with their employer's plan for primary coverage. They can remain on the University's plan but will be covered for secondary insurance only. When making our plan selections for the coming calendar year, those enrolling their spouses will be required to complete a Working Spouse- Primary Coverage Certification Form. This FORM needs to be returned to the Benefits Office within your 31-day new-hire period or within a 31-day life-event period. It is recommended that you verify the coordination of benefits provisions of your spouse's primary plan to ensure secondary coverage is permissible. Failure to turn in your documentation by the deadline will result in non-enrollment of your spouse. The form can be found at the end of this document.

Children:

Children include biological children, adopted children, stepchildren, and foster children under the age of 26. If the child is developmentally disabled or physically handicapped, insurance may be continued after age 26 under the circumstances described in the group policy. The University requires that employees certify eligibility of all new dependents. Failure to turn in your documentation by the deadline will result in non-enrollment of your children.

Coverage Effective Date:

Your benefits will be effective on the first day of the month following the date of your eligible appointment or on the date of a qualifying status change, if you enroll within 31 days of the event. Annual open enrollment elections are effective January 1 of the new plan year.

UA's Current List of Carriers:



BENEFITS ELIGIBILITY CHART

The following chart summarizes eligibility by employee classification for the listed University benefits. A box without a symbol indicates that the employee classification is not eligible for that specific benefit. Some programs also may have additional eligibility requirements, described in greater detail throughout this overview.

 = 100% FTE  = Less than 100%FTE

Benefit Program	9 month Faculty	12 month Faculty	Post-Doctoral Researcher	Classified Staff	Unclassified Staff	Professional Staff Administrative	Professional Staff Academic	Police	CWA & SBU Bargaining Unit
Dental	■	■	■	■	■	■	■	■	■
Disability	■	■	■	■	■	■	■	■	■
EAP	■	■	■	■	■	■	■	■	■
Flexible Spending	■	■	■	■	■	■	■	■	■
Life Insurance	■	■	■	■	■	■	■	■	■
Medical and Prescription drug*	■	■	■	■	■	■	■	■	■
Parental Leave ¹	■	■	■	■	■	■	■	■	■
Retirement ARP	■	■	■	■	■	■	■	■	■
Retirement STRS	■ ●	■ ●					■		
Retirement OPERS			■ ●	■ ●	■ ●	■ ●			■ ●
Retirement OPERS LE								■ ●	
Sick Leave ²	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●
Supplemental Retirement Accounts	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●
Tuition Remission ³	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●
Vacation ⁴		■		■ ●	■	■	■	■ ●	■ ●
Vision	■	■	■	■	■	■	■	■	■
Workers Comp	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●	■ ●

*In Accordance with the Affordable Care Act employees working 30-39 hours a week have medical plan access.

For specific details refer to the University Rules or the appropriate [Collective Bargaining Agreement \(CBA\)](#). University Rules can be found on the [General Counsel's website](#).

- ¹ Refer to University Rules - **3359-11-02** (Family and Medical Leave, Leave of Absence, Paid Maternity Leave, Paid Paternity Leave, Paid Adoptive and Foster Parent Leave and Vacations for Employees Other Than Bargaining Unit Faculty), **3359-26-04** (Absence from Campus) or the appropriate collective bargaining agreement.
- ² Refer to University Rules **3359-26-04** (Absence from Campus), **3359-11-01** (Sick Leave for School of Law Faculty, Professional Staff, Classified, and Other Non-Bargaining Unit Faculty), **3359-11-02** (Family and Medical Leave, Leave of Absence, Paid Maternity Leave, Paid Paternity Leave, Paid Adoptive and Foster Parent Leave and Vacations for Employees Other Than Bargaining Unit Faculty) or the appropriate collective bargaining agreement
- ³ Subject to minimum hours worked. Refer to University Rules **3359-20-04.3** (Faculty Privileges and Benefits), **3359-26-02** (General Staff and Personnel Policies and Procedures) or the appropriate collective bargaining agreement
- ⁴ Refer to University Rules **3359-11-03** (Vacation Policy for Full-Time, Administrative Faculty, (Other Than Bargaining Unit Faculty), and Professional Staff), **3359-26-04** (Absence from Campus) or the appropriate collective bargaining agreement.

Medical & Prescription Plan Comparison & Summary

MEDICAL PLAN COPAYS/DEDUCTIBLES/OUT OF POCKET INFORMATION:

Plan Type	Gold In-Network	Gold Out-of-Network	Blue In-Network	Blue Out-of-Network
Deductibles	\$400 Single \$800 Family	\$800 Single \$1,600 Family	\$600 Single \$1,200 Family	\$1,200 Single \$2,400 Family
Employee Coinsurance	15%	35%	25%	45%
Out-of-Pocket Maximums <small>(Medical and RX Combined Limit)</small>	\$2,500 Single \$5,000 Family	\$5,000 Single \$10,000 Family	\$4,500 Single \$9,000 Family	\$9,000 Single \$18,000 Family
Employee Co-pays				
PCP	\$25	Subject to Deductible & 35% Coinsurance	\$30	Subject to Deductible & 45% Coinsurance
Specialist	\$35		\$45	
Urgent Care	\$50		\$70	
Emergency Room	\$100		\$140	

PRESCRIPTION PLAN COPAY INFORMATION:

Prescription	Gold 30 Day Retail	Gold 90 Day Mail Order*	Blue 30 Day Retail	Blue 90 Day Mail Order*
Tier 1 Generic	\$10	\$25	\$12	\$30
Tier 2 Preferred Brand	25% up to \$70 max	25% up to \$175 max	30% up to \$85 max	30% up to \$225 max
Tier 3 Non-Preferred Brand	35% up to \$85 max	35% up to \$215 max	40% up to \$125 max	40% up to \$250 max
Tier 4 Specialty	30% up to \$125 max	n/a	35% up to \$150 max	n/a

All of the University's medical plans include prescription drug benefits through CVS Caremark. All prescription drugs that are covered under the Plan fit within one of the following categories:

Generic: A non-brand name drug that has the same active ingredients as a brand-name drug and is sold for substantially less than the brand-name drug.

Preferred: A drug that is on the list of preferred brand name drugs and requires you to pay less than you would pay for a non-preferred drug. Drugs in this category are based on a combination of factors, including safety, effectiveness and cost.

Non-Preferred: A drug that is not on the list of preferred brand name drugs and requires you to pay more than you would pay for a preferred drug.

Specialty: Drugs that are used in the management of chronic or genetic diseases, including injectables, infused drugs or oral medications, or drugs that otherwise require special handling.

2025 FULL TIME ANNUAL EMPLOYEE MEDICAL PLAN CONTRIBUTION RATE

GOLD PLAN – PPO 85/15% 2025 ANNUAL PRE-TAX RATES *					
Salary Range	Employee Contribution Rate	Employee Coverage	Employee & Spouse Coverage	Employee & Child(ren) Coverage	Family Coverage
\$0 – \$33,999	15%	\$1,514	\$3,029	\$2,875	\$4,390
\$34,000 - \$41,999	17%	\$1,716	\$3,433	\$3,258	\$4,976
\$42,000 - \$54,999	18%	\$1,817	\$3,635	\$3,450	\$5,268
\$55,000 - \$74,999	19%	\$1,917	\$3,837	\$3,641	\$5,561
\$75,000 – 100,999	20%	\$2,018	\$4,039	\$3,833	\$5,854
\$101,000 - \$135,999	21%	\$2,119	\$4,241	\$4,024	\$6,146
\$136,000+	23%	\$2,321	\$4,645	\$4,408	\$6,732

BLUE PLAN – PPO 75/25% 2025 ANNUAL PRE-TAX RATES *					
Salary Range	Employee Contribution Rate	Employee Coverage	Employee & Spouse Coverage	Employee & Child(ren) Coverage	Family Coverage
\$0 – \$33,999	6.80%	\$626	\$1,253	\$1,183	\$1,798
\$34,000 - \$41,999	8.99%	\$828	\$1,657	\$1,566	\$2,384
\$42,000 - \$54,999	10.09%	\$929	\$1,859	\$1,758	\$2,676
\$55,000 - \$74,999	11.19%	\$1,029	\$2,061	\$1,949	\$2,969
\$75,000 – 100,999	12.28%	\$1,130	\$2,263	\$2,141	\$3,262
\$101,000 - \$135,999	13.38%	\$1,231	\$2,456	\$2,332	\$3,554
\$136,000+	15.57%	\$1,433	\$2,869	\$2,716	\$4,140

Employee contribution amounts are calculated based on a percentage of the plan rate. The rates listed above are annual rates. For employees paid monthly, take the rate above and divide by the number of pays you have per year for your deduction per pay. i.e., 9 month divide by 9 pays per year. For employees paid bi-weekly, divide by 24 to get your per pay deduction. Note for bi-weekly employees there are two pays per year that do not have benefits deducted.

Dental & Vision Plans

DENTAL PLAN SUMMARY & COMPARISON CHART

Delta Dental PPO (Point-of-Service)	Delta Dental PPO™ Dentist Plan Pays	Delta Dental Premium® Dentist Plan Pays	Non participating Dentist <i>The nonparticipating dentist fee may be more than what your dentist Charges. You are responsible for that difference.</i>
Diagnostic and Preventive	100%	100%	100%
Basic Services	70%	70%	70%
Major Services	50%	50%	50%
Orthodontic Services <i>Up to age 19, with \$1,000 lifetime maximum</i>	50%	50%	50%
Balance Billing Protection	Yes	Yes	No
Deductible	\$50 per person for basic and major services.		
Annual Benefit Maximum	\$1,250 per person for all services.		

Annual Employee Contribution Rates

Level of Coverage	Annual Pre-Tax Rate of 15%
Employee	\$58.00
Employee + Spouse	\$119.43
Employee + Child(ren)	\$112.09
Employee + Spouse +Child(ren)	\$172.69

VISION PLAN SUMMARY

Benefit	VSP Signature Network	Other Providers <i>Maximum Reimbursement</i>
Well Vision Exam (per calendar year)	\$10 Copay every plan year	Up to \$35
Prescription Glasses	\$15 Copay	--
Lenses (every calendar year)	Included in prescription glasses every plan year.	<ul style="list-style-type: none"> • Single vision: up to \$25 • Lined bifocal: up to \$40 • Lined trifocal: up to \$55
Frames (every other calendar year)	\$140 allowance 20% off amount over allowance	Up to \$45
Contact Lens (<i>instead of glasses</i>)	No Copay. \$140 allowance for contacts and the contact lens exam. 15% off contact lens exam and fitting	Up to \$105
Laser Vision Correction	Average 15% off the regular price or 5% off the promotional price from contracted facilities.	None

Annual Employee Contribution Rates

Level of Coverage	Annual Pre-Tax Rate
Employee	\$85.56
Employee + 1	\$171.12
Employee + 2 or more	\$250.32

Flexible Spending Account (FSA)

DEPENDENT CARE FSA

- ❖ This account reimburses you for any child and dependent care expenses (daycare, private sitter, etc.) that would otherwise be eligible for a tax credit by the IRS.
- ❖ Employees can contribute a maximum of \$2,500 if single or \$5,000 if married filing a joint tax return and both working.
- ❖ Eligible expenses can be reimbursed only up to the current balance of payroll contributions in your account and cannot exceed your annual election amount.

Helpful Tip: A Dependent Care FSA may not provide the greatest tax advantage for all employees. Greater tax savings may be gained for some individuals by claiming available tax credits on both the state and federal income tax returns. Consult a tax advisor for assistance with determining which option may be the most financially advantageous for your situation.

HEALTH CARE FSA

- ❖ This account sets aside money to pay for eligible out-of-pocket health care expenses (copays, coinsurance, prescriptions, etc.) for you or any of your eligible dependents during the plan year.
- ❖ Employees can contribute a maximum of \$3,300 annually into a health care flexible spending account.
- ❖ To be considered eligible for reimbursement, health care expenses cannot be paid by or available through any benefits plan.
- ❖ New participants will receive a debit card for easy FSA withdrawals for eligible items.
- ❖ Health care FSA funds **cannot** be used to reimburse health plan contributions or premiums, including premiums for long-term care and COBRA.
- ❖ You may use your full annual election amount prior to having the full amount of payroll contributions deducted and deposited into your account.

MORE ABOUT THIS BENEFIT...

- ❖ *Claims that cannot be paid for with the FSA debit card must be submitted via a claim form.*
- ❖ *FSA contributions must be used within the plan year or they will be forfeited in accordance with the IRS rules.*
- ❖ *The plan has a carry over option. Health FSA funds deposited during the 2025 calendar year must be used by December 31, 2025, except that funds up to \$660 may be carried over to the 2026 plan year. This only applies to Health FSAs and does not apply to dependent care FSAs.*
- ❖ *The plan has a 90-day run out period through March 31, 2026 to send in your receipts for reimbursement for services rendered in 2025.*

Life Insurance

GROUP TERM LIFE INSURANCE

- ❖ As an eligible University employee, you are provided University-paid life insurance coverage of two times your annual base salary up to \$100,000 (subject to the age reduction formula) at no cost.
- ❖ Employees may also purchase supplemental life insurance up to five times their annual base salary up to a maximum of \$500,000 without an evidence of insurability medical exam or up to \$1,000,000 with a successful evidence of insurability medical exam. Costs vary by age and salary.
- ❖ After your initial hire the only time you may change your life insurance amount is during open enrollment or as a result of a qualified family status change. It is important to note that during subsequent changes you are limited to the next level of coverage and may not skip levels.

ACCIDENTAL DEATH AND DISMEMBERMENT BENEFIT

In the event of death due to an accident, this benefit provides an additional 2 times your annual regular base salary up to a maximum of \$100,000 (subject to the age reduction formula).

AGE REDUCTION FORMULA

An age reduction formula goes into effect at age 65 and reduces the life insurance benefit by 8% annually on the January 1st following employee's birthday. A final reduction of 10% occurs on the January 1st following the employees 70th birthday.

DEPENDENT GROUP TERM LIFE INSURANCE

Eligible faculty and staff may purchase life insurance coverage for a spouse and children up to age 26 at low monthly fees. This benefit pays up to \$10,000 (depending on level of coverage selected) in the event of the death of your covered spouse or child.

- ❖ The employee is the beneficiary for any dependent life benefit.
- ❖ The amount of dependent life insurance chosen for the spouse is limited to 50% of the employee's amount of life insurance.
- ❖ All eligible dependent children are covered under one plan at the same premium rate. Additional premiums are not charged for additional children.

PREMIUMS

- ❖ Rates per \$1,000 per month. For your specific annual cost log into Workday and review your benefits enrollment form or confirmation.
- ❖ Dependent Life Premiums are paid on an after-tax basis via payroll.

Employee Life Monthly Contribution	
AGE BAND	MONTHLY PREMIUM
Under 30	\$0.051
30-34	\$0.057
35-39	\$0.079
40-44	\$0.121
45-49	\$0.190
50-54	\$0.279
55-59	\$0.403
60-64	\$0.524
65-69	\$0.741
70-74	\$1.404
75+	\$4.337
AD&D	\$0.018

Dependent Life Monthly Contribution	
COVERAGE LEVEL	MONTHLY PREMIUM
\$2,500 child/\$5,000 spouse	\$1.68
\$5,000 child/\$10,000 spouse	\$3.36

EFFECTIVE DATE: The guaranteed issue amount is effective at the later of the date you become eligible and the date your enrollment is complete. The portion requiring EOI is effective upon approval from UNUM.

Disability Insurance

Disability Insurance provides financial protection for eligible employees by paying a percentage of weekly earnings in the event of a disability. Consider enrolling in a disability insurance plan if you have inadequate emergency funds set aside to pay for an unexpected accident or illness or you have a limited sick leave balance.

SHORT-TERM DISABILITY (STD)

This plan provides 60% salary replacement up to a maximum weekly benefit of \$1,400 as non-taxable income.

- ❖ **WAITING PERIOD:** For injury, the waiting period is 14 days and for illness (including pregnancy), the waiting period is 28 days. You must exhaust all sick leave before the policy pays benefits.

LONG-TERM DISABILITY (LTD)

The Base Plan for long-term disability insurance is funded by the University. This plan provides 60% salary replacement up to a monthly maximum of \$5,000.

- ❖ **BUY UP OPTION:** This option provides 70% salary replacement up to \$6,000 monthly benefits. For this option, you will pay the difference in cost from the Base Plan.
- ❖ **WAITING PERIOD:** This plan requires a six month waiting period and sick leave must be exhausted before benefit are paid out.

PREMIUMS & BENEFIT OFFSETS

Pre-existing condition clause: A "Pre-existing Condition" means any injury or sickness for which you incurred expenses, received medical treatment, care or services including diagnostic measures, took prescribed drugs or medicines, or for which a reasonable person would have consulted a Physician within 12 months before your most recent effective date of insurance.

Benefit Offsets: An employee for whom disability benefits are payable under this policy may be eligible for benefits from other income benefits. If so, the insurance company may reduce the disability benefits by the amount of such other income.

Short Term Disability Premiums:

Age	Monthly Premium (Price per \$10)
Under 40	\$0.241
40-49	\$0.213
50-59	\$0.275
Over 60	\$0.378

*The cost of short-term disability insurance is paid by employees on an after-tax basis, determined by age and salary. Rates are per \$10 of payable benefit. [Click here](#) for more details.

Long Term Disability Premiums:

The base LTD is provided at no cost to employees by The University. The buy-up plan may be purchased at an additional cost of \$.32 per \$1,000 of covered salary. For your specific rates log into Workday and view your benefit confirmation statement

Retirement Program Choices

STATE RETIREMENT PROGRAMS

STRS and OPERS offer choices of three plans within their systems to new members. Watch for an introduction mailer from STRS or OPERS to learn more about their plan offerings **OR** visit their websites.

THINGS YOU SHOULD KNOW

Ohio public institutions do not participate in the federal Social Security system, other than contributions to Medicare. Instead, faculty and staff are required to participate in the Ohio state retirement system. In recognition of the diverse retirement needs of employees, the state provides retirement through two systems, Ohio Public Employees Retirement System (OPERS) for staff, and State Teachers Retirement System of Ohio (STRS) for faculty.

An additional option, The University of Akron Alternative Retirement Plan (ARP) 401 (a), is also available to eligible employees of public institutions who hold a full-time position of 100% FTE.

It is important that you understand how each program works so you can pick the one that best fits your retirement savings objectives. You should carefully consider your personal situation before making an election. You also may want to seek the advice of a retirement planning professional who is familiar with the plan options.

If eligible, you have 120 days from, and including, the effective date of your eligible appointment to make your irrevocable election and enroll in either ARP or OPERS/STRS.

Benefits Administration must receive your completed Retirement Program Election form by noon on the last business day before the 120th day. If no election is made, you will automatically be enrolled in OPERS/STRS. You will have up to 180 days after your hire date to make a selection between their three plans.

If you elect the ARP, you must choose an ARP provider in the Retirement@Work portal. Your enrollment in ARP is not complete until you have enrolled with your chosen ARP provider.

Retirement contributions will be sent to either OPERS or STRS (based on your appointment classification) until an election is made between the appropriate state system and the ARP (if eligible). If ARP is elected, contributions as of your ARP eligibility date will be transferred automatically to your chosen ARP providers by OPERS/STRS. You do not earn service credit under the state system while participating in the ARP.

TYPES OF PLANS AVAILABLE AND THEIR CHARACTERISTICS

The retirement plan options differ in several ways. The basic difference is in how the retirement benefits are determined.

DEFINED BENEFIT (DB) PLAN

The defined benefit plan is available through OPERS and STRS. In this type of a plan, your retirement income is determined by a calculation that uses your age, years of service, and final average salary.

You and the university make contributions to this plan to fund the retirement benefits. The investment of contributions in this plan type are managed OPERS/STRS; therefore, you do not bear any investment risk. Your benefit grows as your years of service and final average salary increase.

DEFINED CONTRIBUTION (DC) PLAN

A defined contribution plan is available through the ARP, and STRS. In this type of plan, your retirement income is driven by several variables including the performance of the investment choices you select, amount of contributions deposited into your account, and the payment option you choose at the time of retirement.

You and the university make contributions to this plan, and you decide how to allocate those contributions among a variety of investment options. Your balance at your retirement is equal to the contributions made to the plan and the investment earnings or losses the account experiences.

When participating in a defined contribution plan, the law requires that a portion of the employer contribution be sent to the state system to be applied towards the unfunded liability associated with the defined benefit plans (“mitigating rate”). This amount may be adjusted up or down on a periodic basis as determined by State law and the retirement system.

COMBINED PLAN

This plan includes features of the Defined Benefit and Defined Contribution plans. Your retirement benefits are determined by:

- ❖ A formula that uses your age, years of service and final average salary
- ❖ And a portion from contributions to the plan and the investment earnings or losses on that account

You and the university make contributions to this plan. You determine the investment options under the defined contribution portion of the plan. At retirement, you receive a portion from the defined benefit formula and your account balance for the defined contribution portion. There are many important factors to consider when selecting your retirement plan. Carefully consider your options. You may want to speak to a retirement planning professional to discuss your long term-financial goals and other personal considerations such as your risk tolerance, your potential length of employment, and other retirement savings.

For more details and to see a list of ARP and SRA vendors, [click here](#). You can also visit the state retirement system websites at www.strsoh.org or www.opers.org.

SUPPLEMENTAL RETIREMENT ACCOUNTS (SRA)

Many private sector companies offer 401(k) plans. As a university employee, you have the opportunity to contribute to something similar called a Supplemental Retirement Account (SRA). SRAs allow you to enhance your retirement plan savings through voluntary contributions and include the Deferred Compensation Program (457(b) plan) and Tax-Deferred Accounts (403(b) plan), and Roth 457(b) plan options. Contributions to the 457(b) and 403(b) are on a pre-tax basis. Roth 403(b) contributions are on an after-tax basis