



Annual Enrollment & Resource Guide

FOR INSURANCE, RETIREMENT AND WELLNESS PROGRAMS

EMPLOYEE | JULY 2018

A PUBLICATION OF
THE OFFICE OF EMPLOYEE BENEFITS

Annual Enrollment & Resource Guide

This special edition guide provides details on the benefits enrollment process and the uniform benefits plan for UT employees and their qualified dependents. It also contains important information you may wish to refer to throughout the year.

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IMPORTANT: AVAILABILITY OF SUMMARY HEALTH INFORMATION

Choosing a health coverage option is an important decision. To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about any health coverage option in a standard format, to help you compare across options. The Uniform Summary of Benefits and Coverage (SBC) provision of the Affordable Care Act requires all insurers and group health plans to provide consumers with an SBC to describe key plan features in a mandated format, including limitations and exclusions. The provision also requires that consumers have access to a uniform glossary of terms commonly used in health care coverage.

To review an SBC for your medical plan, visit the website <http://bit.ly/UTBSBC>. You can view the glossary at www.cms.gov/CCIIO/Resources/Files/Downloads/uniform-glossary-final.pdf. To request a copy of these documents free of charge, you may call the SBC hotline at (855) 756-4448.

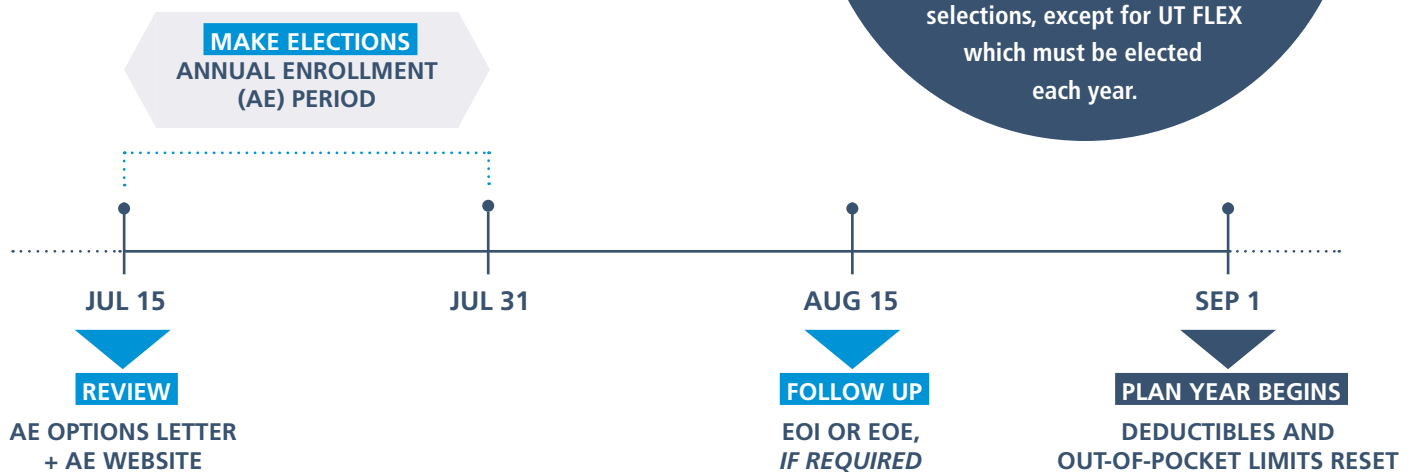
UT Benefits for one. Health for UT System.

IMPORTANT

Carefully review this guide for information about insurance plan premium rates, plan changes, and other Annual Enrollment details.

If you don't want to make any changes, you don't have to do anything to continue with your current plan selections, except for UT FLEX which must be elected each year.

Annual Enrollment Timeline



What to Expect in the New Plan Year

SEPTEMBER 1, 2018

- Plan changes begin.
- New ID cards for new plans elected.
- New ID cards for any plans you changed during Annual Enrollment.
- Deductibles and limits start over.

ONGOING: KEEP IN TOUCH




YOUR ADDRESS | Notify your institution about any changes to your contact information.

NEWSLETTER | Read the UT Office of Employee Benefits monthly newsletter. If you don't already receive it, subscribe by entering your email address in *My UT Benefits*.

CONTACT INFO | Keep the Contact Information section of this newsletter to contact insurance vendors for plan information or your institution about your coverage.



Annual Enrollment Detailed Timeline

BY JULY 15	 REVIEW MAKE INFORMED BENEFITS CHOICES WITH RESOURCES AVAILABLE TO HELP YOU	Annual Enrollment Website available by July 15, 2018 <ul style="list-style-type: none"> • Annual Enrollment Meetings (at your institution) • Insurance vendors available for plan-specific questions (see Contacts at the end of this publication) www.utsystem.edu/offices/employee-benefits
JULY 15 – 31	 MAKE ELECTIONS ANNUAL ENROLLMENT PERIOD	July 15 – July 31, 2018 UT Benefits Enrollment Options (PIN) letter or email delivered by July 15 lists current coverage, options for coverage for the next plan year beginning September 1, 2018, and instructions for making changes online. During this period, you can: <ul style="list-style-type: none"> • Make changes to your benefits, • Add or remove dependents, • Enroll in UT FLEX, and • Change coverage options for certain plans. <p>This is a good time to update other items if you've had changes during the year, like:</p> <ul style="list-style-type: none"> • Contact information, • Tobacco user status, and • Beneficiary information.
BY AUGUST 15	 FOLLOW UP COMPLETE EOI OR EOE (IF REQUIRED)	Deadline Wednesday, August 15, 2018 <p>Evidence of Insurability (EOI) is required to enroll in certain insurance coverage, including: Disability insurance and some Voluntary Group Term Life.</p> <p>Evidence of Eligibility (EOE) is required when you enroll your spouse or a dependent in the UT Benefits program for the first time.</p>

Keep Your ID Cards

Keep your ID cards for other plans you did not change.

If you enroll in a new insurance plan type during Annual Enrollment or you change the plan you are currently enrolled in (such as from Vision to Vision Plus), you will receive a new insurance ID card prior to the start of the 2018-2019 plan year.

Out-of-Pocket Premiums for 2018-2019



There are no increases to any out-of-pocket premium rates for the 2018-2019 plan year. Age and salary-based premiums may change depending on your age and salary as of September 1, 2018.

VOLUNTARY GROUP TERM LIFE RATES

Please be sure to review the rate associated with your age as of September 1, 2018.

PLAN	EMPLOYEE	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	EMPLOYEE & FAMILY
UT SELECT Medical FULL-TIME	\$0	\$257.53 <i>no change</i>	\$269.34 <i>no change</i>	\$507.15 <i>no change</i>
UT CONNECT* Medical FULL-TIME	\$0 <i>DFW only</i>	\$231.78 <i>DFW only</i>	\$242.41 <i>DFW only</i>	\$456.44 <i>DFW only</i>
UT SELECT Medical PART-TIME	\$299.07 <i>no change</i>	\$713.37 <i>no change</i>	\$668.72 <i>no change</i>	\$1,064.24 <i>no change</i>
UT CONNECT* Medical PART-TIME	\$299.07 <i>DFW only</i>	\$713.37 <i>DFW only</i>	\$668.72 <i>DFW only</i>	\$1,064.24 <i>DFW only</i>
UT SELECT Dental	\$28.51 <i>reduction ▼</i>	\$54.13 <i>reduction ▼</i>	\$59.66 <i>reduction ▼</i>	\$84.83 <i>reduction ▼</i>
UT SELECT Dental Plus	\$59.03 <i>no change</i>	\$112.11 <i>no change</i>	\$123.70 <i>no change</i>	\$176.24 <i>no change</i>
DeltaCare Dental HMO	\$8.80 <i>reduction ▼</i>	\$16.73 <i>reduction ▼</i>	\$18.49 <i>reduction ▼</i>	\$26.40 <i>reduction ▼</i>
Superior Vision	\$5.90 <i>no change</i>	\$9.30 <i>no change</i>	\$9.52 <i>no change</i>	\$15.10 <i>no change</i>
Superior Vision Plus	\$9.00 <i>no change</i>	\$14.08 <i>no change</i>	\$15.08 <i>no change</i>	\$21.30 <i>no change</i>
Tobacco Premium Program	\$0 to \$90 per month based upon tobacco user status			

* UT CONNECT is an Accountable Care Organization medical plan available in Dallas Fort Worth area only. See details in page 15.

Basic Coverage package includes medical, prescription, \$40K Basic Life, and \$40K Basic AD&D for employees.

EMPLOYEE RATE CHART

AGE OF SUBSCRIBER ON 9/01/18	RATE PER \$1,000 COVERAGE
15 - 34	\$0.037
35 - 39	\$0.047
40 - 44	\$0.063
45 - 49	\$0.097
50 - 54	\$0.150
55 - 59	\$0.233
60 - 64	\$0.364
65 - 69	\$0.650
70 - 74	\$0.752
75 - 79	\$0.932
80 and over	\$1.634

Employee spouse rates available in *My UT Benefits*.

VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT

MONTHLY PREMIUM RATE
\$0.14 per \$10,000 coverage

SHORT-TERM AND LONG-TERM DISABILITY

MONTHLY PREMIUM RATES	
Short Term Disability	\$0.27 per \$100 of monthly income <i>▼ reduction from \$0.28</i>
Long Term Disability	\$0.38 per \$100 of monthly income



UT SELECT Medical Plan Changes for 2018-2019

Great news – there are no changes to out of pocket premium rates for the UT SELECT Medical plan for 2018-2019! This is the second year in a row where there have been no changes, and since this is a self-funded plan, all participants should be congratulated for being wise healthcare consumers and for using the UT SELECT Medical plan (including prescription coverage) in ways that save money for participants and the plan.

As for the UT SELECT Medical plan, the provider network continues to be administered by BCBSTX and the PPO plan's structure remains unchanged. Also, the UT Health Network (described below) will continue to be offered at participating UT health institutions, and effective September 1, 2018, physicians from UT Rio Grande Valley's Medical School will be included in the UT Health Network. The UT Health Network gives you access to enhanced benefits when services are provided by UT physicians.

There is one benefits **enhancement** to the UT SELECT Medical plan for plan year 2018-2019. The hearing aid benefit is being enhanced to \$1,000 per ear every 3 years (from \$500 per ear every 4 years). Otherwise, there are no benefit changes. The annual deductible remains at \$350

for individuals and \$1,050 for families. Recall that the **deductible** is the amount you pay out-of-pocket for certain services (outpatient and inpatient procedures and services, for example) before the medical plan starts to pay. Once the deductible is met, the plan pays a portion of the costs and you pay a portion called **coinsurance**. In-network coinsurance is 20% of allowed charges. For the 2018-2019 plan year, the UT SELECT Medical Plan **coinsurance out-of-pocket maximum** remains \$2,150 for individuals and \$6,450 for families. This means that you will not pay above that amount in coinsurance for allowed charges.

In accordance with guidelines set by the Affordable Care Act (ACA), total out-of-pocket limits for in-network member cost share (which includes medical and prescription drug costs) are increasing to \$7,350 for the individual (an increase of \$200), and to \$14,700 for families (an increase of \$400). These limits on total out-of-pocket expenses provide an extra level of financial protection for you.

The costs paid for services not covered under the plan, including balance billing for out-of-network services, do not apply to any out-of-pocket limits.

REFRESHER UT HEALTH NETWORK

The UT Health Network is an enhanced plan design for UT SELECT participants receiving services from certain UT physicians at certain UT System Health Institutions. The UT Health Network has lower copays and coinsurance when seeing a UT physician at a UT-owned facility, and you can also save on physician charges when treatment is received from a UT physician at a non-UT owned facility.

Participating UT Medical institutions include:

- UT Rio Grande Valley providers and facilities (effective September 1, 2018);
- UT Medical Branch Galveston facilities and providers;
- UT Health East Texas (Tyler) facilities and providers;
- UT Health Houston providers and facilities; and
- UT Austin, UT Health Houston, UT Health San Antonio, UT Rio Grande Employee and Nursing Clinics.

You can log into Blue Access for Members to access the Provider Finder specific to UT SELECT Medical and find participating providers and facilities clearly marked as being part of the UT Health Network.

REMINDER: IN HOSPITAL / OUTPATIENT SERVICES

Benefits and claims for services provided by Emergency Room physicians, anesthesiologists, radiologists, and pathologists will be based on the network status of the provider. Ask your providers if they are in the BCBS network to ensure network benefits will apply.

PRESCRIPTION DRUG PLAN

The UT SELECT Prescription Drug plan (administered by Express Scripts) is included in the UT SELECT Basic Coverage package. There are occasional updates to the formulary for the UT SELECT Prescription Drug plan. Even though the plan benefits are not changing (annual deductible and copays), you could see changes in your medication costs, generally after January 1 of each year.

Group Term Life and AD&D Insurance



Group Term Life (GTL) insurance from Dearborn National can help ensure financial security for your family and loved ones upon your death. There are no changes to Employee GTL coverage options for 2018-2019.

Benefits for GTL include:

- \$40,000 Basic GTL included in the basic coverage package;
- With EOI approval, employees can elect Voluntary GTL (VGTL) up to 10 times their annual salary up to a maximum of \$2.0 million;
- Spouses of employees who have VGTL are eligible for up to \$50,000 with EOI approval; and
- Spouse and dependent children of employees with VGTL are eligible for \$10,000 VGTL with no EOI required.

Benefits-eligible active employees enrolled in UT SELECT Medical are also automatically enrolled in the Accidental Death and Dismemberment (AD&D) plan as part of the basic coverage package. There are no changes to Employee AD&D coverage options for 2018 - 2019. Benefits for AD&D include:

- \$40,000 Basic AD&D included in the basic coverage package;
- Employees can elect Voluntary AD&D in increments of \$10,000 up to a maximum of \$2.0 million;
- Spouses of employees who have Voluntary AD&D are eligible for up to 50% of the employee amount up to a maximum of \$1.0 million; and
- Dependent children of employees who have Voluntary AD&D are eligible for \$10,000.

Vision Benefits

VISION PLAN OPTIONS

This year, there are no changes to the premium for the vision plans. You and your eligible dependents have the option to enroll in the basic plan or the enhanced "Plus" plan, both administered by Superior Vision. While both plans cover most of the same types of services, the Plus plan includes some additional benefit at a slightly higher premium. New this year is an increase to the already greater frame allowance on the Superior Vision Plus Plan (from the current \$150 to \$165). Compare the benefits closely in order to select the plan that best meets your or your family's particular needs. See below for some examples.

VISION PLAN DESIGN FEATURES 2018-2019

PLAN DESIGN FEATURES	SUPERIOR VISION PLAN	SUPERIOR VISION PLUS PLAN
Annual Exam Copayment	\$35 COPAY	\$35 COPAY
Frame Allowance	\$140	NEW! \$165 (from \$150)
Progressive Lens Allowance	Member pays difference between retail cost of lined trifocals and progressive lenses.	\$120
Covered Lens Options	Standard lens options covered in full; additional options not covered	Standard lenses and additional lens options covered in full: <ul style="list-style-type: none">• Polycarbonates (dependent children to age 26)• Scratch coating• Ultraviolet coating
Network of Providers	Best value provided when visiting a contracted Superior Vision provider. Please contact Superior Vision customer service before you receive services to confirm whether your provider is in-network.	

For additional information about each of the current UT vision plans briefly described below, please visit the OEB website. Plan limitations and exclusions do apply for each of these plans. For specific details about plan benefits and coverage, please contact Superior Vision customer service at (800) 507-3800.



Dental Benefits

REVIEW

UT System and the Office of Employee Benefits are pleased to announce that, through our recent Request for Proposal, Delta Dental was selected to continue as the vendor for the UT Benefits dental plans. This contract ensures uninterrupted services for current participants, comprehensive networks, and flat or lower premium rates depending on the plan selected.

DENTAL PLAN OPTIONS

UT System offers three dental plan options: two self-funded PPO plan options (UT SELECT Dental and UT SELECT Dental Plus) and a fully insured dental HMO option (DeltaCare USA), all administered by Delta Dental Insurance Company. There are no benefit changes on any of the plans, and the rates for the UT SELECT Dental PPO plan and HMO plan are decreasing slightly. The UT SELECT Dental Plus PPO plan rates remain flat.

DENTAL PPO PLAN OPTIONS

PPO dental plans allow you to see any dentist, although your benefits go further if you choose a network dentist. While both PPO plans cover most of the same types of services and provisions, the premiums are different and the benefits are more enhanced in the UT SELECT Dental Plus plan. Compare the benefits closely in order to select the plan that best meets your or your family's particular needs.

PLAN DESIGN FEATURES	UT SELECT DENTAL PPO	UT SELECT DENTAL PLUS PPO
Deductible	\$25	Plan pays deductible.
Annual Benefit Allowance	\$1,250 annual benefit maximum	\$3,000 annual benefit maximum
Orthodontics	Separate \$1,250 lifetime orthodontic maximum	Separate \$3,000 lifetime orthodontic benefit maximum
Network options	Freedom to choose any licensed dentist. For maximum savings, choose from the Dental Preferred Organization (DPO). If you choose a provider outside of the DPO network, you may be subject to balance billing. Contact Delta Dental customer service to confirm the status of your dental provider.	Freedom to choose any licensed dentist. For maximum savings, choose from the Dental Preferred Organization (DPO). If you choose a provider outside of the DPO network, you may be subject to balance billing. Contact Delta Dental customer service to confirm the status of your dental provider.

BENEFITS AND COVERED SERVICES	UT SELECT DENTAL PPO	UT SELECT DENTAL PLUS PPO
Diagnostic & Preventive Services	100%	100%
Basic Services	80%	100%
Major Services	50%	80%
Orthodontic Services	50%	80%

For additional information about the two UT SELECT Dental PPO plans briefly described above, please visit the Office of Employee Benefits website.

DENTAL HMO – DELTACARE USA

The DeltaCare USA Dental Health Maintenance Organization (DHMO) plans require you to choose one dentist or dental facility to coordinate all of your oral health needs. If you need to see a specialist, your primary care dentist will refer you; specialty care requires preauthorization. When you receive a dental service, you pay a fixed dollar amount for the treatment (a "copayment"). Diagnostic and preventive services have a low copayment or even no copayment. However, generally if you visit a dentist outside of the network, you may be responsible for the entire bill.

DELTACARE USA PLAN DESIGN FEATURES

- Set copayments.
- No annual deductibles and no maximums for covered benefits.
- Low out-of-pocket costs for many diagnostic and preventive services (such as professional cleanings and regular dental exams).
- Upon enrollment into the DeltaCare USA plan, you must select a primary dentist. You may call Delta Dental at (800) 893-3582 to find out if your current dentist is in the DeltaCare network. Do not make any appointments until you are certain that DeltaCare has confirmed a dentist for you and/or for each of your covered dependents. If you visit a dentist other than the one listed as your primary dental provider, your services may not be covered.

Plan limitations and exclusions do apply for each of the three plans described above. Contact Delta Dental customer service for specific details about plan benefits and coverage at (800) 893-3582.

Short-term and Long-term Disability

A person has a three in ten chance of suffering a disabling illness or injury that would keep them out of work for three months or more during their career. Disability insurance replaces a portion of your income if you suffer a prolonged illness or non-work related injury that prevents you from doing your job. Dearborn National provides short-term disability (STD) and long-term disability (LTD) insurance benefits for active UT System employees. This benefit is not available for dependents and is not for you to take time to care for an ill or injured family member.

Below is a brief summary of the benefits offered through each of the voluntary disability plans. Exclusions and limitations apply, so for complete details, please see the benefit guides posted on the Disability page of the OEB website.

SHORT-TERM DISABILITY (STD)

The STD benefit is 60% of weekly earnings up to a maximum benefit of \$693 per week after 14 days of disability or the exhaustion of your sick leave (whichever is longer) to a maximum of 22 weeks. If you have enough sick leave to cover this period of time, Short Term Disability coverage may not be useful to you.

AGE AT DISABILITY	MAXIMUM PERIOD PAYABLE
Less than age 60	To age 65, but not less than 5 years
Age 60 through 64	5 years
Age 65 through 69	To age 70, but not less than 1 year
Age 70 and over	1 year

LONG-TERM DISABILITY (LTD)

The LTD benefit is 60% of your monthly earnings up to a maximum benefit of \$12,025 per month after 90 days of disability or the exhaustion of your sick leave (whichever is longer). The maximum period payable depends on your age at the time of disability.

DISABILITY INSURANCE MONTHLY PREMIUM RATES	
Short-term Disability	\$0.27 per \$100 of monthly income ▼ reduction from \$0.28
Long-term Disability	\$0.38 per \$100 of monthly income

Evidence of Insurability (EOI) is required to add disability insurance during Annual Enrollment.

UT FLEX: Convenient, Easy Savings and No Administrative Fee

REVIEW

Participating in the UT FLEX flexible spending account program is convenient, easy, and best of all, saves you money! Through your UT FLEX account, you can pay for eligible health care and dependent day care expenses using pre-tax dollars, which means you don't pay federal income or Social Security taxes on this money.

HOW MUCH MIGHT YOU SAVE?

	WITH AN FSA	WITHOUT AN FSA
ANNUAL SALARY	\$40,000	\$40,000
HEALTH CARE FSA CONTRIBUTION (PRE-TAX)	(\$1,500)	(\$0)
DEPENDENT CARE FSA CONTRIBUTION (PRE-TAX)	(\$4,000)	(\$0)
TAXABLE INCOME AFTER CONTRIBUTION AMOUNT	\$34,500	\$40,000
ESTIMATED TAXES WITHHELD (22.65%)*	(\$7,763)	(\$9,000)
POST-TAX INCOME	\$26,737	\$31,000
MONEY SPENT AFTER TAXES ON HEALTH CARE AND DEPENDENT DAY CARE EXPENSES	(\$0)	(\$5,500)
TAKE HOME PAY	\$26,737	\$25,500
SAVINGS	\$1,237	\$0

*Based on 7.65% FICA and 15% tax bracket.

Note: Please be advised that this example is for illustrative purposes only. These projections are only estimates of tax information and should not be assumed to be tax advice. Be sure to consult a tax advisor to determine the appropriate tax advice for your situation.

UT FLEX HEALTH CARE REIMBURSEMENT ACCOUNT (HCRA)

Important: In response to the Internal Revenue Service (IRS) increasing the annual maximum election, effective plan year 2018-2019 (September 1, 2018) the new annual maximum election per employee for HCRA accounts is \$2,650 (an increase of \$50).

With a UT FLEX HCRA, you can set aside up to \$2,650 per year in pre-tax dollars to pay for eligible health care expenses, including these common expenses:

- Deductibles, copayments, and coinsurance;
- Prescription drugs, insulin, and syringes;
- Dental exams, x-rays, fillings, crowns, and orthodontia;
- Eye exams, prescription eyeglasses, and prescription sunglasses;
- Contact lenses and cleaning solutions; and
- Hearing aids.

You can find details about eligible HCRA expenses online at www.MyUTFLEX.com.

UT FLEX DEPENDENT DAY CARE REIMBURSEMENT ACCOUNT (DCRA)

You can set aside pre-tax dollars (up to \$5,000 per family per calendar year) to pay for eligible expenses for dependent day care that allows you (and, if married, your spouse) to work, look for work, or go to school full time. Eligible expenses for care of qualified dependents include costs for:

- Before / after school care;
- Preschool or nursery school (for pre-kindergarten aged dependents); and
- Summer day camp.

You can find complete details about qualified dependents and eligible DCRA expenses online at www.MyUTFLEX.com.

IMPORTANT REMINDER

Don't forget – to participate in UT FLEX for 2018-2019, you must make your election through the *My UT Benefits* online enrollment system during this year's Annual Enrollment period – even if you are a current UT FLEX participant.

NO ADMINISTRATIVE FEES FOR PARTICIPATION OR DEBIT CARD

There are no administrative fees for participation in the UT FLEX program. The UT FLEX Debit Card will continue to be free for HCRA participants as well. There is no UT FLEX Debit Card for the DCRA.

Using the UT FLEX Debit Card gives you several advantages, including:

- Improving your cash flow throughout the plan year by allowing you to directly access your account for eligible expenses rather than paying out of pocket and filing for reimbursement. You have direct access to your entire HCRA annual election amount beginning on the first day of the plan year (9/1/2018);
- Eliminating the need for you to complete claim forms or any other paperwork for most expenses;* and,
- Ensuring that eligible purchases are automatically deducted from your available UT FLEX HCRA balance so you always know how much you have remaining in your account.

*Save all of your receipts, especially those for dental and vision services which will likely require documentation to prove the service was medically necessary.

Important: If you currently have a UT FLEX Debit Card, do NOT discard it. As long as you make a UT FLEX HCRA election for 2018-2019, your Debit Card will continue to work. Expiring cards will be replaced as necessary, similar to most credit and debit cards.

NEED HELP DETERMINING HOW MUCH TO ELECT?

Use the savings calculator online at www.MyUTFLEX.com to help you estimate your eligible expenses by itemizing your unreimbursed health and dependent day care costs. To use the calculator, you will be asked to enter your annual estimated costs in each category. Once complete, you'll have an estimate for an annual election and you can also see your estimated tax savings!

PHYSICIAN EXERCISE REFERRAL

Individuals with medical conditions that can be improved by physical activity (such as diabetes, hypertension, depression, and more) are able to receive reimbursement from their healthcare flexible spending account to pay for some exercise expenses. A Letter of Medical Necessity is needed from the physician advising the exercise. Details can be found online.

If you need more information about the UT FLEX accounts before you make your annual election, contact Maestro Health customer service. Maestro Health is the administrator for the UT FLEX programs: www.MyUTFLEX.com, 844-UTS-FLEX (844-887-3539), questions@maestrohealth.com.

Dependent Eligibility and Documentation

ELIGIBILITY

Eligibility to participate in certain UT Benefits coverage as a dependent is determined by law. Eligible dependents are:

Your spouse; and

Your children under age 26 regardless of their marital status, including:

- biological children;
- stepchildren and adopted children;
- grandchildren you claim as dependents for federal tax purposes;
- children for whom you are named a legal guardian or who are the subject of a medical support order requiring such coverage; and
- certain children over age 26 who are determined by OEB to be medically incapacitated and are unable to provide their own support.

IF YOU CURRENTLY COVER A DEPENDENT who is also receiving premium sharing for coverage through a plan with Texas A&M or Employees Retirement System of Texas, please choose to have that person covered under only one plan and make the appropriate enrollment changes at this time.



Other Eligibility **SURVIVING DEPENDENTS | INCAPACITATED DEPENDENTS**

SURVIVING DEPENDENTS

A surviving spouse or other benefits-eligible dependent may continue limited participation in the UT Benefits program following the death of a participating employee or retired employee, provided the employee has at least five (5) years of creditable service with either Teacher Retirement System of Texas (TRS) or the Texas Optional Retirement Program (ORP), including at least three (3) years as a benefits-eligible employee with UT System. A surviving spouse may only continue UT Benefits Medical, Dental or Vision coverage they are enrolled in at the time of the employee's death. They may not add coverage at that time, and if the coverage is ever dropped or terminated for non-payment, it may not be reinstated. Surviving dependents are not eligible for Premium Sharing. Coverage may continue for the remainder of the surviving spouse's life. A dependent child may continue until the child loses his or her status as a dependent child. The dependent of an individual who has not met the service requirements at the time of death may elect COBRA coverage for a period not to exceed 36 months.

OVERAGE INCAPACITATED DEPENDENTS

Enrolled children may remain eligible for UT Benefits as an incapacitated dependent if they are determined to be medically incapacitated at the time they age out of eligibility for coverage as a child under the program at age 26. An older dependent child who is determined to be medically incapacitated at the time a subscriber first becomes benefits eligible may be enrolled in the plan if the child was covered by the subscriber's previous health plan with no break in coverage. Please contact your institution's Human Resources or Benefits Office for additional information about covering incapacitated dependent children.

IMPORTANT NOTICE

Misrepresentation of dependent eligibility constitutes a policy violation that could result in consequences ranging from a reprimand to dismissal. Misrepresentation may also require that you reimburse benefits paid on behalf of an ineligible individual. Deliberate misrepresentation may constitute criminal fraud and could result in a referral to law enforcement.

UT Retirement: Annual Enrollment and Your Retirement Savings Opportunities

With Annual Enrollment fast approaching and decisions to be made regarding your health care options, there is no better time to consider your financial health as well.

In addition to a suite of health insurance options to take care of you and your family, the University of Texas System also offers two voluntary retirement savings plans that allow you to plan for the financial future for yourself and your family.

While you can enroll in or increase your contribution in the UTSaver TSA or UTSaver DCP at any time, annual enrollment is a great time to think about your total future retirement needs. Contributions can be as little as \$15 per month or as much as \$18,500 a year. In some cases, you may even be able to contribute more. All contributions are conveniently deducted from your paycheck before taxes, which means your taxable income decreases. If you prefer to make your contributions after taxes have been deducted, that option is available for you too.

NEED HELP INVESTING YOUR CONTRIBUTIONS?

The UTRetirement Programs partner with our providers to ensure you have the resources you need. There are dozens of financial representatives in your area who will be glad to sit down with you and help you determine your best course of action.

After making your annual enrollment elections, make sure to go back and click on the link to the UT System Retirement Programs website at www.utretirement.utsystem.edu to learn more about the TSA or DCP plans, or to read about the services each provider makes available to you at no cost. You can even schedule an appointment with a financial advisor at your convenience. Take the opportunity to ensure that your financial health is just as robust as your physical health!

Living Well Make It a Priority



REVIEW

The UT System Living Well program provides a variety of resources to enable employees, retirees, and dependents who participate in the UT SELECT Medical plan to take charge of their health and develop their own personal wellness program. Our mission is to improve the health and well-being of Texans through achieving optimal levels of health for University of Texas System employees, retirees and dependents at all Institutions.

LIFESTYLE MANAGEMENT

Weight Management and Tobacco Cessation Programs: Guidance and support with licensed wellness coaches provided by BCBSTX.

Call (800) 462-3275.

CONDITION MANAGEMENT

These voluntary health improvement programs provided by BCBSTX can help members with congestive heart failure, coronary artery disease, chronic obstructive pulmonary disease, asthma, and diabetes.

Call (800) 462-3275.

24/7 NURSELINE

Get answers to your health care questions, information about major medical issues, chronic illness support, and lifestyle change support.

Call toll-free: (888) 315-9473, 24 hours a day, 7 days a week.

SPECIALIST PHARMACISTS

If you take medications to treat high cholesterol, diabetes, or one of several other conditions, specialist pharmacists can answer your questions and offer improvements in the quality and affordability of your pharmacy care. **Learn more:** (800) 818-0155.

EMPLOYEE ASSISTANCE PROGRAM

The Employee Assistance Program (EAP) can help you resolve problems that affect your personal life or job performance.

REIMBURSEMENT FOR EXERCISE EXPENSES

Individuals with medical conditions that can be improved by physical activity are able to receive reimbursement from their healthcare flexible spending account to pay for some exercise programs or equipment. A Letter of Medical Necessity is required for all exercise referrals.

ONSITE HEALTH CHECKUPS

This checkup, similar to what you might receive at your doctor's office, is designed to identify issues that may affect your health and help you get them under control before they become serious. Participating institutions

will be communicating the dates via email and posters.

ONSITE FLU SHOTS

Flu shots may be available at your institution at no cost to you. Details will be sent via email and our "A Matter of Health" newsletter during September/October.

ANNUAL PHYSICAL ACTIVITY CHALLENGE

Team up with your institution for the annual Physical Activity Challenge. You'll receive a weekly goal and can work with colleagues towards earning your institution the coveted Traveling Trophy.

NATURALLY SLIM

Naturally Slim is an online program that helps you lose weight and improve your overall health – all while eating the foods you love. With Naturally Slim, you'll learn that you don't have to starve yourself or count calories to be healthy, lose weight, and keep it off forever.

TOBACCO CESSATION RESOURCES

The UT SELECT Medical plan offers members a variety of tobacco cessation resources at no out-of-pocket cost. These resources include professional counseling and pharmaceutical therapy.

SHARE YOUR HEALTH & WELLNESS SUCCESS STORY

Be a resource and inspiration to help others improve their health! Do you have a story to share?

Tell us about it at www.surveymonkey.com/r/LivingWellSuccessStory.

LEARN MORE

Read about all of these programs at our Living Well website:
www.livingwell.utsystem.edu.



How to Change Your Benefits

All of your changes can be made using the *My UT Benefits* online system at www.utsystem.edu/myutbenefits.

LOGIN TO MY UT BENEFITS

Login using one of the options provided. Your PIN will be sent to you by July 15th in an email or letter titled "Your UT Benefits Enrollment Options."

IMPORTANT! Logging in with your SSN is no longer an option for My UT Benefits. Employees are encouraged to login using UT EID (UT Austin) or Single Sign On (SSO). As an alternative, you may also login using your 8-character Benefits ID (BID) & PIN or Campus ID & PIN. Your BID can be found on your medical, prescription, or dental ID Cards. If needed, your institution's HR or Benefits Office can provide your Campus ID. Both BID and Campus ID are also available once you successfully login to *My UT Benefits*.

BEFORE MAKING YOUR ELECTIONS, YOU MUST DECLARE OR UPDATE YOUR TOBACCO USER STATUS

The Tobacco Premium Program (TPP) is an out-of-pocket premium of \$30 per month. It applies to subscribers and dependents aged 16 and over who are enrolled in the UT SELECT Medical plan and use tobacco products. Before making election changes via My UT Benefits, you will be prompted to confirm tobacco user status for yourself and eligible dependents.

EVIDENCE OF INSURABILITY/EVIDENCE OF ELIGIBILITY

If you make a coverage election that requires you to submit an Evidence of Insurability (EOI) application or Evidence of Eligibility (EOE) for a dependent, you must follow through by providing this information by August 15, 2018. If you do not, your requested changes will not be implemented.

The *My UT Benefits* online system will automatically direct you to complete EOI electronically if you enroll online. Otherwise, you may complete a paper form and submit it to the insurer. You can view and print the Life and Disability insurance EOI forms online under the "Forms" tab at www.dearbornnational.com/ut.

REVIEW YOUR CHANGES

You'll receive a confirmation statement via email or letter following any election changes. Be sure to review your elections. You have until midnight July 31 to log into *My UT Benefits* and correct any errors. After July 31 you should contact your Human Resources office if you discover an error.

BE AWARE THAT CHANGES MADE DURING AE WILL TAKE EFFECT ON SEPTEMBER 1

EXCEPTION: If EOI is required and has not been approved by September 1, changes will take effect on the approval date for Life Insurance or the first of the month following approval for Disability Insurance.

Evidence of Insurability **DEADLINE FOR SUBMISSION IS AUGUST 15**

During this year's Annual Enrollment (AE) period, Evidence of Insurability (EOI) will be required for certain Voluntary Group Term Life changes and to enroll in Short- or Long-term Disability.

Important Notes:

- EOI is not required for enrollment in the UT SELECT Medical plan.
- The deadline for submitting electronic EOI is **August 15th**.
- Paper EOI forms submitted via U.S. Mail must be postmarked by **August 15th**.

LIFE AND DISABILITY EOI

The *My UT Benefits* online system will automatically direct you to complete EOI electronically if you enroll online. Otherwise, you may complete a paper form and submit it to the insurer. You can view and print the life and disability EOI forms online at

www.dearbornnational.com/ut/pdf/EOI_Rev2016.pdf.

You can also request a form from your institution's HR or Benefits Office.

Evidence of Eligibility **DEADLINE FOR SUBMISSION IS AUGUST 15**

DOCUMENTATION – EVIDENCE OF ELIGIBILITY

When requesting to add a dependent to your UT Benefits coverage, you must provide appropriate supporting documentation demonstrating Evidence of Eligibility (EOE). You should be prepared to provide copies of relevant documents. Depending on the relationship and circumstances, appropriate documentation may include items such as a marriage certificate, a birth certificate, completed adoption paperwork, or other legal documents.

The *My UT Benefits* online system offers the convenience of submitting documents electronically when adding NEW dependents to your benefits coverage during Annual Enrollment. To do this, you simply upload clear, legible digital images (scanned documents or photographs) of required documents directly through *My UT Benefits* as evidence of your dependent's eligibility. Additional information will be available when you log into *My UT Benefits*, including FAQs about the documentation upload process. There is a separate tab for dependent information to help you more easily find details that you may need.

UT CONNECT Medical Plan for Dallas / Fort Worth Area

REVIEW

We're pleased to share exciting news about a new UT Benefits offering in the Dallas / Fort Worth (DFW) area. Effective September 1, 2018, a new health plan, the UT CONNECT Accountable Care Organization (ACO), will be available for Employees and certain Retirees living in the designated service area. This plan is not replacing the UT SELECT Medical plan, it is an option that can be elected instead of UT SELECT during Annual Enrollment. By enrolling in the UT CONNECT ACO, participants will have access to excellent care managed through a designated primary care provider and will receive all of their medical services from a top quality network of Southwestern Health Resources providers and facilities.

ELIGIBILITY

The UT CONNECT ACO focuses on achieving better health outcomes through closely managed medical care, and benefits are offered only for care obtained through a specific network of providers and facilities in the DFW area. Eligibility for the plan is limited to benefits-eligible Employees and non-Medicare eligible Retirees who live within the DFW service area. Retirees living in the area who are Medicare-eligible or who cover Medicare-eligible family members are not eligible to enroll in the UT CONNECT ACO, but continue to be eligible for the UT SELECT Medical plan. **IMPORTANT NOTE:** Those wishing to enroll in the UT CONNECT ACO plan must make a positive election during Annual Enrollment. If you are currently enrolled in the UT SELECT Medical plan, you will continue in that plan unless you actively enroll in UT CONNECT.

QUALITY PROVIDER NETWORK

By enrolling in the UT CONNECT ACO (administered by Blue Cross Blue Shield of Texas), you can be assured that you and your dependents will have access to carefully managed health care through a dedicated network of outstanding Southwestern Health Resources (SWHR) providers and facilities. To ensure a broad selection of providers in the Dallas area, UT CONNECT participants will have access to certain carefully-selected community doctors in addition to SWHR providers. If you currently receive services from a SWHR affiliated physician, they will be in the UT CONNECT provider network. If you don't currently see a SWHR physician, but want to enroll in UT CONNECT, you can locate a network primary care provider online beginning in mid-July or by contacting BCBSTX's dedicated UT CONNECT Customer Service team at (888) 372-3398 starting July 1, 2018. **IMPORTANT NOTE:** When enrolling in the UT CONNECT ACO plan, participants must designate a primary care provider (PCP) from the list of SWHR and affiliated community physicians. All care is coordinated through the PCP so participants must have one on file to receive benefits.

OUT-OF-POCKET PREMIUM SAVINGS

Just as with the UT SELECT Medical plan, full-time Employee-only and Retiree-only coverage is available at no cost to the primary subscriber. Out-of-pocket premium rates for full-time employee and retiree Subscriber/Spouse, Subscriber/Children, and Subscriber/Family levels of coverage are approximately 10% lower than those for the UT SELECT Medical plan. Check the complete UT Benefits premium rate chart to see the savings you can enjoy based on your level of coverage.

ENHANCED PLAN DESIGN

When visiting UT CONNECT ACO network providers, benefits under the UT CONNECT plan are similar to those on the UT SELECT Medical plan. However, there are a few important differences between the two plans outlined below, and you can go online to take a deeper look at the UT CONNECT plan at www.bcbstx.com/utconnect.

	NEW UT CONNECT ACO	CURRENT UT SELECT PPO
ADMINISTERED BY BLUE CROSS BLUE SHIELD OF TEXAS	YES	YES
COPAY FOR FIRST PRIMARY CARE PHYSICIAN (PCP) OFFICE VISIT	\$0	\$30 (unless for preventive care)
COPAY FOR PCP OFFICE VISITS (After the First Visit)	\$15 (unless for preventive care)	\$30 (unless for preventive care)
COPAY FOR SPECIALIST OFFICE VISIT	\$25	\$35
COPAY FOR FIRST 5 DAYS OF INPATIENT CARE FOR UT SOUTHWESTERN, TEXAS HEALTH, CHILDREN'S HEALTH AND COOK CHILDREN'S HOSPITAL LOCATIONS	\$0	\$500
COPAY FOR OUTPATIENT FACILITY (Plus Coinsurance)	\$50	\$100
ANNUAL DEDUCTIBLE INDIVIDUAL / FAMILY	\$250 / \$750	\$350 / \$1,050
COINSURANCE	80% plan / 20% member	
COINSURANCE MAXIMUM INDIVIDUAL / FAMILY	N/A	\$2,150 / \$6,450
ANNUAL OUT-OF-POCKET MAXIMUM INDIVIDUAL / FAMILY (includes medical and prescription drug deductibles, copayments and coinsurance)	\$7,350 / \$14,700	
OUT-OF-NETWORK AND OUT-OF-AREA BENEFITS?	Urgent Care and emergency only	YES



UT CONNECT, continued

IMPORTANT NOTE: Due to the managed care model of the UT CONNECT ACO plan, there are no benefits for out-of-network or out-of-area services except for urgent care and medical emergencies.

The UT CONNECT ACO plan will continue to utilize the current prescription drug plan (administered by Express Scripts) that matches the UT SELECT prescription benefit. The UT CONNECT ACO plan includes Basic Life Insurance for employees and retirees, plus Accidental Death and Dismemberment Insurance for employees.

CUSTOMER SERVICE

For more information about the UT CONNECT ACO plan or further assistance, please call BCBSTX's dedicated UT CONNECT customer service team at **(888) 372-3398**.

What Do We Do & How Can You Find Help?

INSTITUTION

Address Change
Life Events / Change of Status
Eligibility
Rates

UT BENEFITS

Monthly Newsletters
Legal Notices
Plan Guides
Annual Enrollment

PLAN ADMINISTRATORS

Plan Details
ID Cards
Value Added Benefits
Claim Issues
Customer Service

Changes During the Year



Outside of Annual Enrollment, you may not make changes to your benefits unless you have certain qualified change of status events including:

- marriage, divorce, annulment, or spouse's death;
- birth, adoption, medical child-support order, or dependent's death;
- significant change in residence if the change affects you or your dependents' current plan eligibility;
- change of job status affecting eligibility;
- change in dependent's eligibility (e.g., reaching age 26 – dependent children become ineligible for any coverage the month following their 26th birthday, or gaining or losing eligibility for any other reason); or
- significant change in coverage or cost of other benefit plans available to you and your family.

You may enroll in or make changes to benefits by contacting your institution's HR or Benefits office within 31 days of one of these change of status events.

An employee

- whose dependent loses insurance coverage under the Medicaid or CHIP program as a result of loss of eligibility of either the employee or the dependent; or
- whose dependent becomes eligible for a premium assistance subsidy under Medicaid or CHIP may enroll this dependent in the basic coverage under UT Benefits, as long as the dependent meets all other UT eligibility requirements and is enrolled within 60 days from the date of the applicable event. If enrollment of the dependent is conditioned on enrollment of the retired employee, the retired employee will also be eligible to enroll.

Nondiscrimination Notice

DISCRIMINATION IS AGAINST THE LAW

The University of Texas System Office of Employee Benefits complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The UT System Office of Employee Benefits does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The UT System Office of Employee Benefits provides:

Free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters, and
- Written information in other formats (large print, audio, accessible electronic formats, other formats).

Free language services to people whose primary language is not English, such as:

- Qualified interpreters, and
- Information written in other languages.

If you need these services, contact the UT System Office of Human Resources.

If you believe that the UT System Office of Employee Benefits has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: The UT System Office of Human Resources, 210 W. 7th Street, Austin, Texas 78701, (512) 499-4587, (512) 499-4395, esc@utsystem.edu. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the UT Office of Human Resources is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at www.hhs.gov/ocr/office/file.

Accessibility Requirements Notice

REVIEW

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al [UT SELECT Medical](#).

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số [UT SELECT Medical](#).

Chinese

注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 [UT SELECT Medical](#)。

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. [UT SELECT Medical](#) 번으로 전화해 주십시오

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم [UT SELECT Medical](#)

Urdu

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں [UT SELECT Medical](#)

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa [UT SELECT Medical](#).

French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le [UT SELECT Medical](#).

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। [UT SELECT Medical](#) पर कॉल कर।

Laotian

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີຂຶ້ນໃຫ້ທ່ານ. ໂທ [UT SELECT Medical](#)

Persian (Farsi)

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم باشد. با [UT SELECT Medical](#) تماس بگیرید.

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer [UT SELECT Medical](#).

Gujarati

ચુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટ ઉપલબ્ધ છ. ફોન કરો [UT SELECT Medical](#).

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните [UT SELECT Medical](#).

Japanese

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。... [UT SELECT Medical](#) まで、お電話にてご連絡ください。

UT SELECT Medical 1-866-882-2034
UT CONNECT Medical 1-888-372-3398
UT SELECT Prescription Drug 1-800-818-0155
UT SELECT Medicare Part D 1-800-860-7849 (TTY: 1-800-716-3231)
UT SELECT Dental 1-800-893-3582
UT FLEX 1-844-887-3539

UT Institutions

Plan Administrators



REVIEW

UT ARLINGTON

Office of Human Resources
(817) 272- 5554
Fax: (817) 272-6271
benefits@uta.edu

UT AUSTIN

Human Resources
(512) 471-4772 or
Toll Free: (800) 687-4178
Fax: (512) 232-3524
HRSC@austin.utexas.edu

UT DALLAS

Office of Human Resources
(972) 883-2221
Fax: (972) 883-2156
benefits@utdallas.edu

UT EL PASO

Office of Human Resources
(915) 747-5202
Fax: (915) 747-5815
benefits@utep.edu

UT HEALTH SCIENCE CENTER HOUSTON

Employee Benefit Services
(713) 500-3935
Fax: (713) 500-0342
benefits@uth.tmc.edu

UT HEALTH SAN ANTONIO

Office of Human Resources
(210) 567-2600
Fax: (210) 567-6791
ben-admin@UTHSCSA.EDU

UT HEALTH EAST TEXAS (TYLER)

Office of Human Resources
(903) 877-7784
Fax: (903) 877-5394
benefits@uthct.edu

UT MD ANDERSON CANCER CENTER

Human Resources Benefits
(713) 745-6947
Fax: (713) 745-7167
MyHR@mdanderson.org
Physicians Referral Service (PRS)
(713) 792-7600
Fax: (713) 794-4812
prsfacbensrvs@mdanderson.org

UT MEDICAL BRANCH AT GALVESTON

Employee Benefits Services
(409) 772-2630, Option "0"
Toll Free: (866) 996-8862
Fax: (409) 772-2754
benefits.services@utmb.edu

UT PERMIAN BASIN

Human Resources
(432) 552-2752
Fax: (432) 552-3747
tijerina_a@utpb.edu

UT RIO GRANDE VALLEY Brownsville

Office of Human Resources-Benefits
(956) 882-8205
Fax: (956) 882-6599
benefits@utrgv.edu
Edinburg
Office of Human Resources-Benefits
(956) 665-2451
Fax: (956) 665-3289
benefits@utrgv.edu

UT SAN ANTONIO

Human Resources
(210) 458-4250
Fax: (210) 458-7890
benefits@utsa.edu

UT SOUTHWESTERN MEDICAL CENTER

Human Resources Benefits Division
(214) 648-9830
Fax: (214) 648-9881
benefits@utsouthwestern.edu

UT SYSTEM ADMINISTRATION

Office of Human Resources
(512) 499-4587
Fax: (512) 499-4380
ohr@utsystem.edu

UT TYLER

Office of Human Resources
(903) 566-7467
Fax: (903) 565-5690
humanresources@uttyler.edu

INSURANCE PLAN ADMINISTRATORS

UT SELECT MEDICAL

(Blue Cross and Blue Shield of Texas)
Group: 71778
(866) 882-2034
M-F 8:00 AM-6:00 PM CT
www.bcbstx.com/ut

UT SELECT PRESCRIPTION

(Express Scripts)
Group: UTSYSRX
(800) 818-0155
24hrs a day 7 days a week
www.express-scripts.com/ut

UT SELECT PART D PRESCRIPTION

(Express Scripts)
Group: 7454MDRX
(800) 860-7849
24hrs a day 7 days a week
www.express-scripts.com/ut

UT CONNECT MEDICAL

(Blue Cross and Blue Shield of Texas)
Dallas / Fort Worth area only
(888) 372-3398

UT FLEX

(Maestro Health)
(844) UTS-FLEX (887-3539)
M-F 7:00 AM-7:00 PM CT
Sat 9:00 AM-2:00 PM CT
www.myutflex.com

RETIREMENT PROVIDERS

FIDELITY INVESTMENTS

(800) 343-0860
M-F 7:00 AM-11:00 PM CT
www.netbenefits.com/ut

VOYA FINANCIAL

(866) 506-2199
M-F 7:00 AM-9:00 PM CT
Sat 7:00 AM-3:00 PM CT
<https://utexas.prepare4myfuture.com>

LINCOLN FINANCIAL GROUP

(800) 454-6265 * 8
M-F 7:00 AM-7:00 PM CT
www.lfg.com/ut

LIVING WELL HEALTH PROGRAM

livingwell@utsystem.edu
www.livingwell.utsystem.edu

UT SELECT DENTAL and UT SELECT DENTAL PLUS

(Delta Dental)
Group: 5968
(800) 893-3582
M-F 6:15 AM-6:30 PM CT
www.deltadentalins.com/universityoftexas

DELTACARE USA DENTAL HMO

(Delta Dental)
Group: 6690
(800) 893-3582
M-F 7:00 AM-8:00 PM CT
www.deltadentalins.com/universityoftexas

SUPERIOR VISION

Group: 26856
(800) 507-3800
M-F 7:00 AM-8:00 PM CT
Sat 10:00 AM-3:30 PM CT
www.superiorvision.com/ut

GROUP TERM LIFE, AD&D, AND DISABILITY

(Dearborn National)
Group: GFZ71778
(866) 628-2606
M-F 7:00 AM-7:00 PM CT
www.dearbornnational.com/ut

TIAA

(800) 842-2776
TDD (800) 842-2755
M-F 7:00 AM-9:00 PM
Sat 8:00 AM-5:00 PM CT
www.tiaa.org/public/tcm/utexas/home

VALIC

(800) 448-2542
M-F 8:00 AM-7:00 PM CT
www.valic.com/utexasorp



THE UNIVERSITY *of* TEXAS SYSTEM
FOURTEEN INSTITUTIONS. UNLIMITED POSSIBILITIES.

OFFICE OF EMPLOYEE BENEFITS
210 W. 7TH STREET
AUSTIN, TEXAS 78701

Annual Enrollment is July 15 - 31

Important News About Your UT Benefits and Annual Enrollment is Enclosed.

For detailed plan information visit our website at
www.utsystem.edu/offices/employee-benefits