

**UNIVERSITY OF THE PACIFIC  
FACULTY AND STAFF**

# 2021 BENEFIT GUIDE



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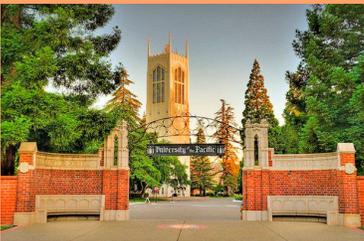
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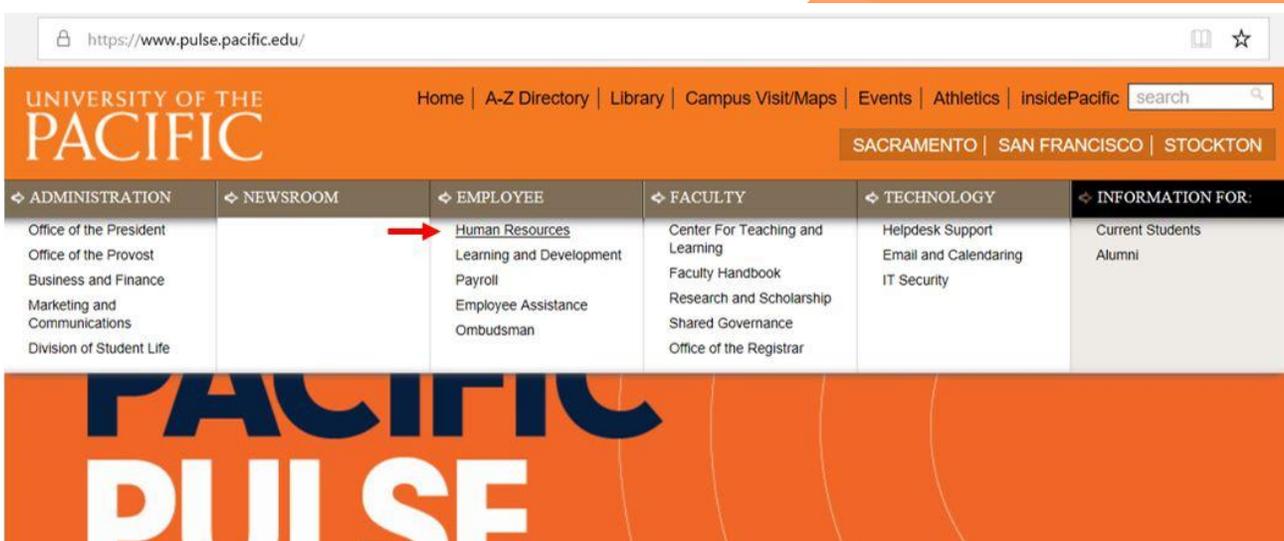
# What's New

## Benefits Webpage

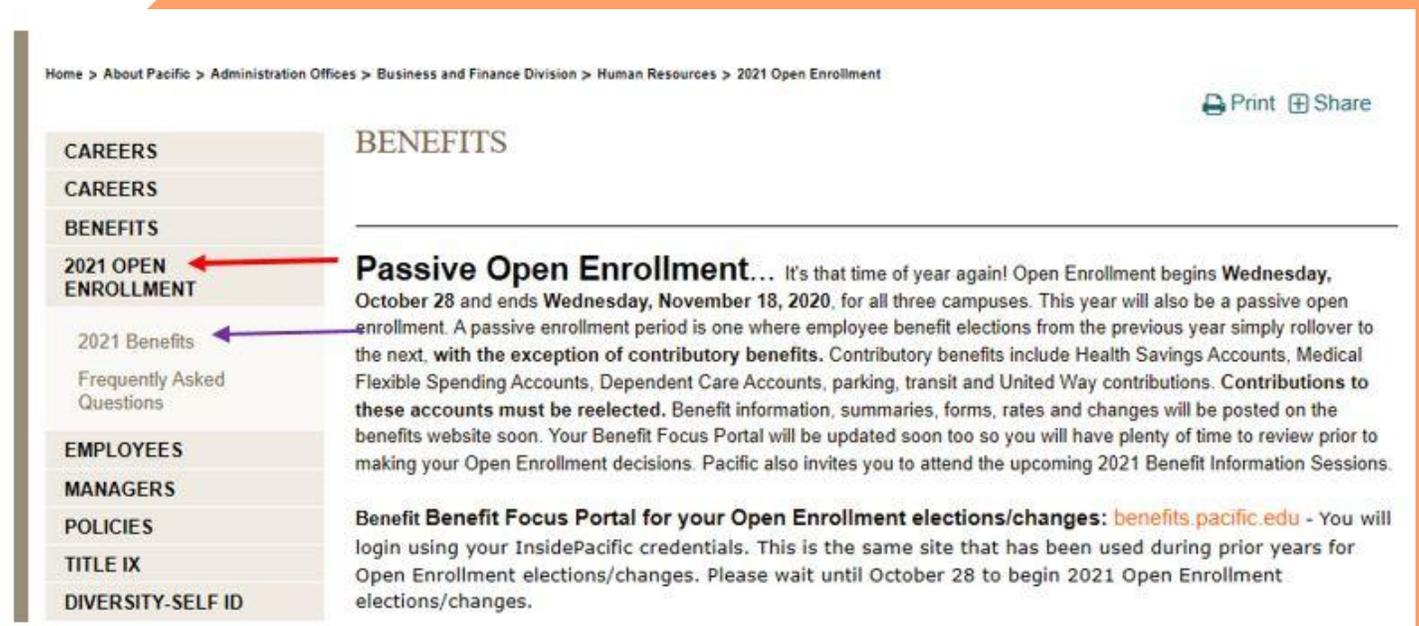
Due to the new website design and configuration most of our links are broken. We are currently working on fixing this. To view any 2021 benefit information and flyers please visit our [2021 Open Enrollment Webpage](#).

To get to the webpage please follow the below steps:

1. Log into the [Pulse Website](#) and navigate to Human Resources.



2. On the left side click on *2021 Open Enrollment* and then *2021 Benefits*.



# What's New

## No Benefit Fair

As a result of the COVID-19 pandemic, working remotely, and safe social distancing, the benefit fairs are cancelled. Open enrollment for the 2021 plan year will be a passive enrollment period and is scheduled from October 28 to November 18, 2020. To help guide you during this year's Open Enrollment, please attend an information session via Zoom. Sessions will be hosted by the Benefits Team.

The university's Benefit Team is always ready to assist you. Please send any inquiries to [employee\\_benefits@pacific.edu](mailto:employee_benefits@pacific.edu).

## Passive Open Enrollment

A passive enrollment period is one where employee benefit elections from the previous year simply rollover to the next, with the exception of contributory benefits. Contributory benefits include Health Savings Accounts, Medical Flexible Spending Accounts, Dependent Care Accounts, Parking, Transit and United Way contributions. Contributions to these accounts must be reelected.

Effective January 1, 2021 the vendor for the Group Accident Insurance coverage will change from UNUM to Symetra. If you are currently enrolled in accident insurance with UNUM and wish to continue the coverage, you will need to re-elect the benefit in the online benefit portal during open enrollment.

## Vendor Changes

### Voluntary Life Insurance

Pacific offers an opportunity for you to purchase additional Supplemental Term Life and AD&D insurance for you and your family. Effective January 1, 2021 the vendor for this coverage will change from Lincoln Financial to Symetra.

If you would like to enroll in or make a change to your Supplemental Life Insurance during Open Enrollment simply log in to the online benefit portal and make your elections.



# Important Reminders

## Open Enrollment

Open Enrollment this year will be from October 28, 2020 (Wednesday) through November 18, 2020 (Wednesday).

Please note that there will be no exceptions to extending open enrollment. Review your Employee Benefit Summary Report to confirm the elections you made.

The University does not provide compensation for waiving benefits.

## Online Benefit Enrollment

<http://benefits.pacific.edu>

Employees must access the enrollment website during the open enrollment period to make any changes in their benefits. If you would like to continue with the same coverage you will not need to make any enrollment elections if you are enrolled in any contributory benefits and/or Accident Insurance.

Contributory benefits include the following:

- Health Savings Account
- Medical Flexible Spending Account
- Dependent Care Account
- Transit
- Parking
- United Way contributions.

## Dependent Verifications

If electing coverage for a new dependent (i.e., spouse, domestic partner, or child) please make sure to have available their date of birth and social security numbers when completing your enrollments. You will also be required to upload a marriage or domestic partner certificate and/or birth certificate for children.

# Open Enrollment Information Sessions

## Zoom Meetings

Due to COVID-19 we will not be having a Benefit Fair nor be holding any one-on-one sessions this year. In lieu of this, we will be holding Zoom meetings, on a weekly basis, to briefly go over 2021 Benefit Plans. Please view the schedule below and register for an Information Session if you would like to attend. If you have any personal questions feel free to email our team at [employee\\_benefits@pacific.edu](mailto:employee_benefits@pacific.edu).

## Benefit Sessions

## Date

## Time

1st Open Enrollment

Thursday, October 29, 2020

12:00pm – 1:00pm

Benefit Information Session

2nd Open Enrollment

Thursday, November 5, 2020

10:30am – 11:30am

Benefit Information Session

3rd Open Enrollment

Thursday, November 12, 2020

12:00pm – 1:00pm

Benefit Information session

4th Open Enrollment

Tuesday, November 17, 2020

2:30pm – 3:30pm

Benefit Information session



# Enrollment Information

## Who is Eligible

### Employees:

- Full-time
  - staff who work 30 hours or more per week at least 9 months of the year
  - faculty who are 75% FTE or more at least 9 months of the year
- Part-time
  - staff who work 20 to 29 hours per week at least 9 months of the year
  - faculty who are 50% to 74% FTE at least 9 months of the year
- ACA Requirements
  - Must be working an average of 130 hours per calendar month (30hrs/wk) for 12 consecutive months (counting of months begins the 1st of the month following date of hire) to be benefit eligible
  - Break in Service Rule
    - A benefit eligible employee who terminates employment and is rehired working at least 1 hour per week must be offered benefits immediately unless the break in service is greater than 26 weeks

### Dependents:

- legal spouse (same or opposite sex) or Registered Domestic Partner (RDP)
- biological child, adopted child, stepchild, legal ward, foster child, or an eligible dependent of your spouse/RDP up to the age of 26
- child over age 26 who became physically or mentally disabled prior to attaining age 26 who is supported primarily by you (proof of the condition is required)

## Benefit Effective Date of Coverage

Benefits become effective the first day of the month following start of employment or the first day of employment if that date is the first day of the month.

- Ex: Hire date is 01/05/2021 -- Coverage becomes effective 02/01/2021;  
Hire date is 02/01/2021 -- Coverage becomes effective 02/01/2021

# Enrolling into Benefits

## Enrollment Procedures

Newly hired faculty and staff have 31 days from the date of hire to enroll in benefits through Benefit Focus, Pacific's online enrollment platform. You have 31 days from the event date to make eligible enrollment changes due to a qualifying life event. See the Qualifying Life Event Chart for event eligibility.

- Collect the date of birth, social security number, and address for each dependent or beneficiary you wish to cover.
- Consider your needs and the needs of your eligible dependents. Review any coverage offered through your spouse/ Domestic Partner's employer to avoid costly duplicate coverage.
- Carefully review the plan information in the benefit guide and plan materials available on our Benefits Page through pulse.pacific.edu.

## Logging into Benefit Focus

Visit [benefits.pacific.edu](https://benefits.pacific.edu)

Log in using your Pacific Net ID and password

When you log in you will see the welcome page. You can navigate through the Welcome Page to view the different information that is available to you.

The screenshot shows the Pacific University Benefits website. At the top, there is a navigation bar with the following links: HOME, HEALTH BENEFITS, FLEXIBLE SPENDING, RATES, LIFE & DISABILITY, RETIREMENT, and MORE. Below the navigation bar, the page is divided into three main sections. On the left is a 'QuickLinks' section with links to Pacific Benefits Webpage, InsidePacific, Contacts, Anthem-Find a doctor, Kaiser Account Portal, and IRS Publications. The middle section is titled 'Welcome Iliana!' and contains a welcome message for Pacific Benefits, stating that Pacific has benefits offerings for employees with individual needs in mind. It also includes a note for new employees to make benefit elections within 31 days of their hire date. On the right is a section titled 'New Hire & Life Event Enrollments, HSA/Parking/Transit contribution changes, and view Benefit Summaries' with a prominent 'CLICK HERE' button.

# Enrolling into Benefits

## Guiding You Through the Process

To start enrolling in your benefits you will first need to click on the "*Click Here*" button that is on the Welcome Page.

New Hire & Life  
Event Enrollments,  
HSA/Parking/Transit  
contribution  
changes, and view  
Benefit Summaries



Here are the basic steps for completing your benefit elections:

- Navigate from page to page by selecting the "*Next*" or "*Previous*" buttons.
- Select "*Cancel*" on any screen to return to the Home Page.

Note: If you have not completed and saved your benefit elections, you will receive a warning message, which allows you to return to your benefit elections to complete and save them before leaving the current screen.

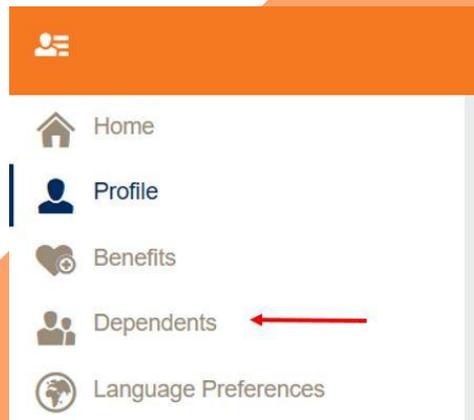
- Save your elections on each benefit Summary page when you have entered all required information.
  - Look over your information closely. If you need to change any information, select the "*Edit*" links next to the corresponding section. Select "*Save*" once you have made all necessary changes.

In order to avoid unauthorized access to your information, you must safely end a session logging out. After 15 minutes, the system will generate warning messages that indicate you will be logged out of the system due to inactivity. This message will provide the opportunity to continue or log out.

# Enrolling into Benefits

## Adding/Editing Dependents

If you will be adding or making changes to your dependents you will want to complete this before electing your benefits. From the Home Page, you can select the "Dependents" icon, on the left hand side, to access current dependent information or to add dependents to your profile. You can also add dependents as part of the benefit enrollment flow. Select "Add Dependent". After updating each required field, select "Next". After entering dependent information, you may begin the benefit enrollment flow.



### Before you enroll in benefits

Do you have any dependents/beneficiaries you want to add to your profile? You will add your dependents to coverage when you enroll in your benefits.

Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.

To add a dependent, click 'Add Dependent'

Add Dependent

Next

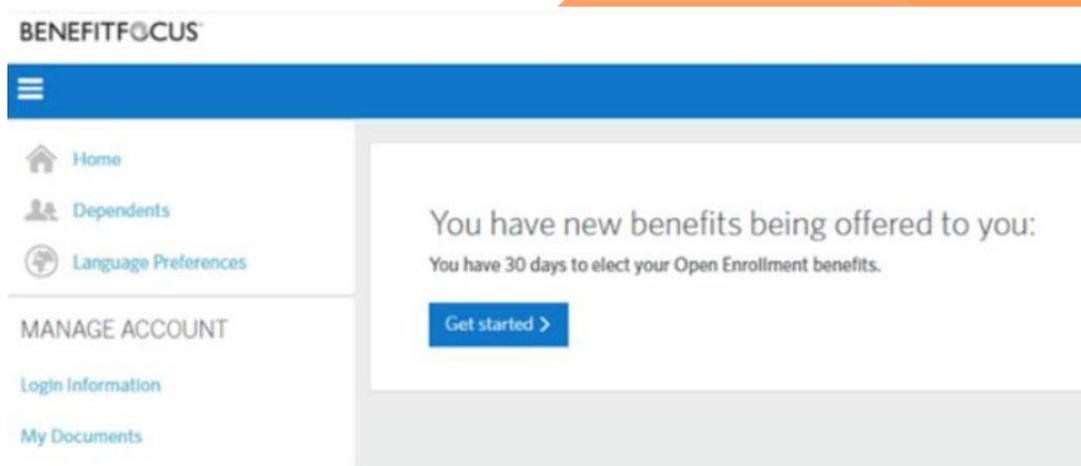
Previous

# Enrolling into Benefits

## Enrolling in Your Benefits

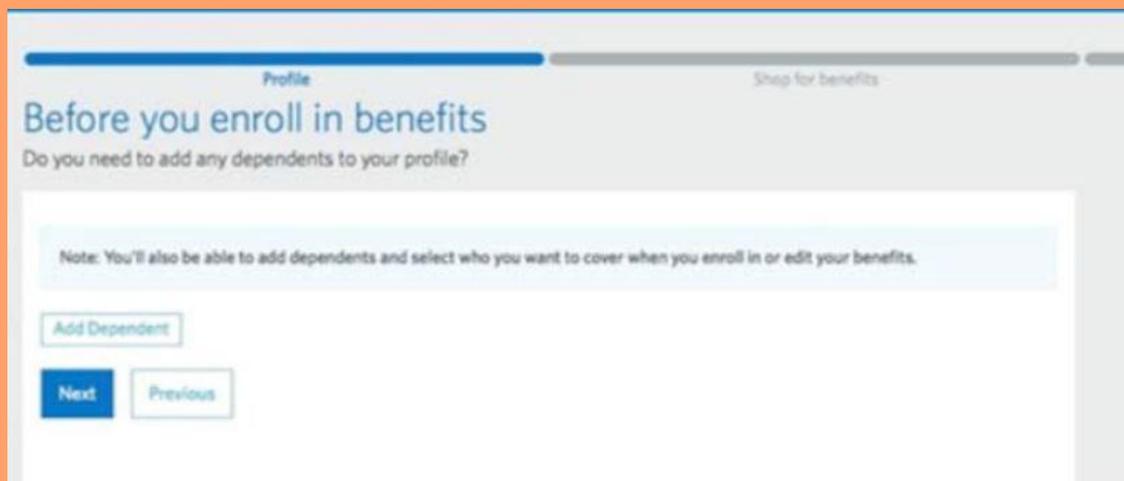
The Home page shows you the information you need to complete. Select the "Get Started" button to begin. The following are sample steps for completing a typical Medical Benefit election. Note that your actual steps may vary, depending on the information required by your employer and the insurance carrier.

### 1. Select "Get Started" on the Home Page



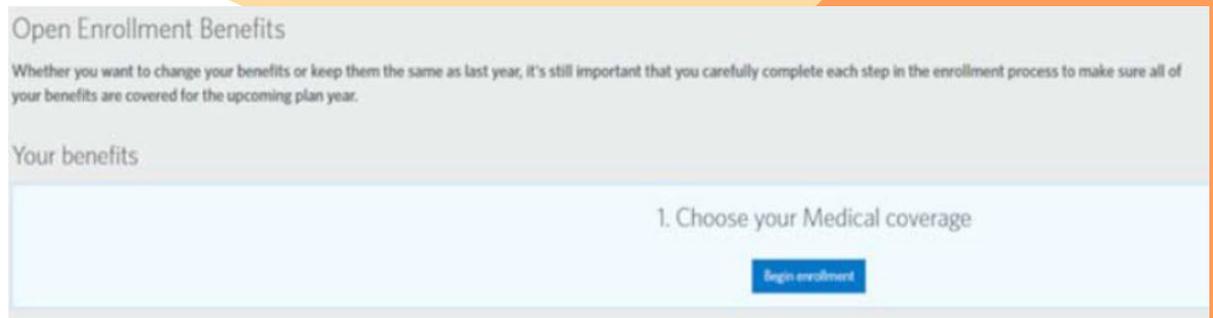
### 2. Chose one of the following options:

- *Add Dependent*: if you need to add dependents to include in your benefit elections.
- *Next*: To continue enrolling in benefits if you had previously added dependents or without adding dependents



# Enrolling into Benefits

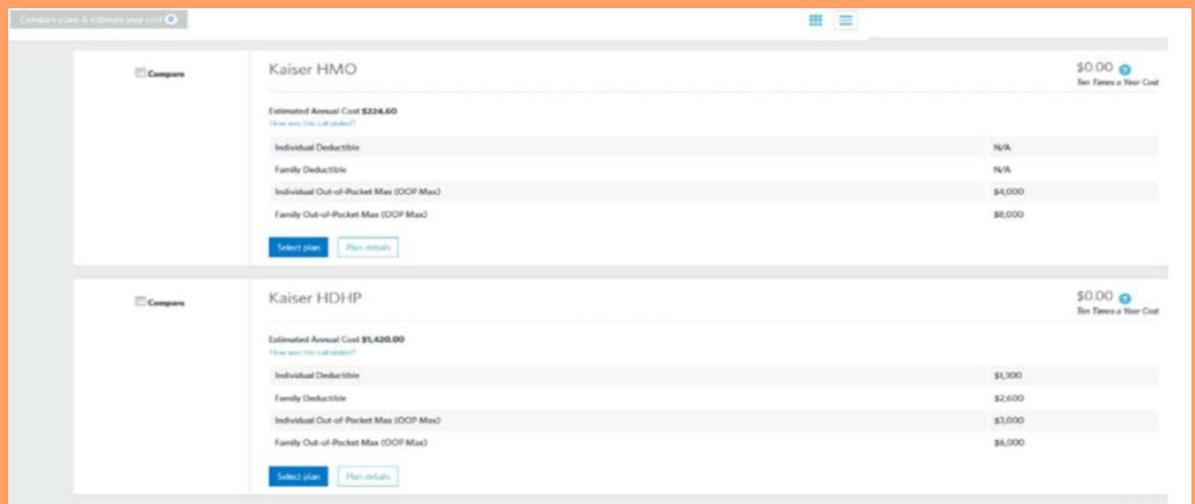
## 3. Select "Begin Enrollment"



4. For each benefit type, review your benefit plan options. Please review the provided decision support tools, such as plan comparison, cost estimation, documents, videos and web links to help you choose a benefit plan.

5. For each benefit type, click on "Select Plan" once you have decided on a benefit plan that best suits your needs.

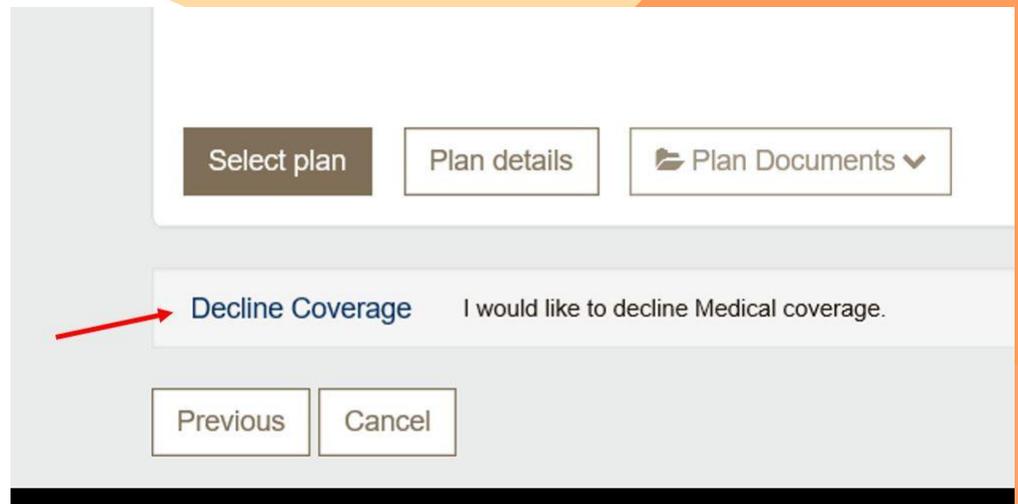
- If you are unsure what plan to select and would like to seek advise please feel free to contact the Benefit Resource Center at 888.336.7463



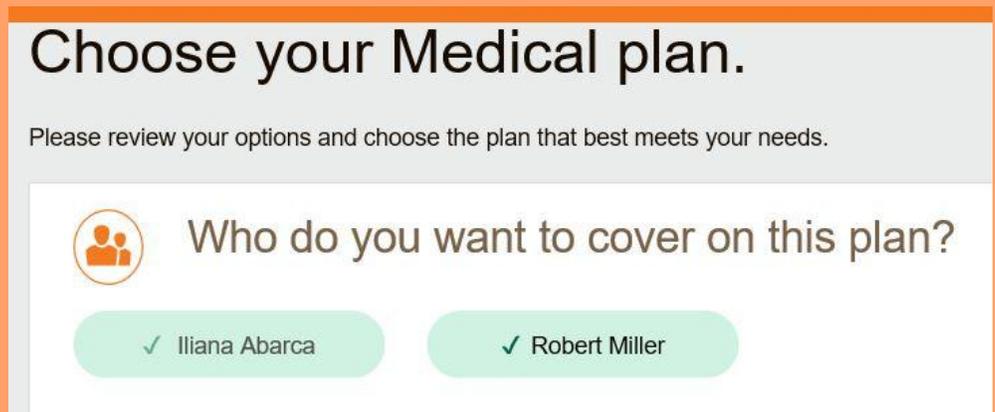
Plan Name	Estimated Annual Cost	Individual Deductible	Family Deductible	Individual Out-of-Pocket Max (OOP Max)	Family Out-of-Pocket Max (OOP Max)	Monthly Premium
Kaiser HMO	\$224.60	N/A	N/A	\$4,000	\$8,000	\$0.00
Kaiser HDHP	\$1,420.00	\$1,300	\$2,600	\$3,000	\$6,000	\$0.00

# Enrolling into Benefits

6. If you would like to waive benefits scroll to the bottom and select "*Decline Coverage*".



7. If you are adding dependents to your coverage make sure to select their name at the top at the time of selecting your benefit. When you select your dependent(s) a check mark should appear before their name and should turn green.



# Enrolling into Benefits

8. Review your benefit election information. Expand any section to review more information and select the "Edit" link to make changes. Select "Complete Enrollment" once you have finished with your benefit enrollment process.

The screenshot displays two sections of benefit information. The first section, titled "Your Voluntary Dental coverage" with a yellow tooth icon, shows "Delta Dental PPO (Dependent Coverage)". It lists: Offered By: Other; Requested Coverage Level: Employee + 1; Effective Date: 01/01/2018; and Persons Covered: Brett MeTest4348, Spouse09 MeTest4348. Below this is an "Edit coverage" button and a "Show Plan Details" dropdown. The second section, titled "Your Medical coverage" with a green plus icon, shows "Kaiser HDHP". It lists: Offered By: Kaiser; Requested Coverage Level: Employee + 1; Effective Date: 01/01/2018; and Persons Covered: Brett MeTest4348, Spouse09 MeTest4348. Below this is an "Edit coverage" button and a "Show Plan Details" dropdown. At the bottom right of the page is a green "Complete Enrollment" button.

9. You will be returned to the Home page and receive the "Congratulations" message at the top of the screen.

The screenshot shows the Home page of the benefits portal. On the left is a navigation menu with icons for Home, Profile, Benefits, Dependents, and Language Preferences, along with a "MANAGE ACCOUNT" section. The main content area features a green banner with a checkmark icon and the text: "Congratulations, Brett! You have successfully completed your enrollment process. Your confirmation number is: 15882937878-561030. Please review and print your Benefit Detail Report for your records." Below this is a section titled "Dependent Verification Document Request" with the text: "Documentation must be submitted and/or approved for the following dependent: Spouse09 MeTest4348. Access My Document Center to submit now." and a blue "Edit your benefits >" button.

# Enrolling into Benefits

10. After you complete your enrollment, please review and print your "Employee Detail Report" for your records. This is located on the left hand side of the Home Page. You may make changes online via the mobile app anytime during the Open Enrollment period.

- Home
- Profile
- Benefits
- Dependents
- Language Preferences

## Manage Account

Login Information

Life Change

## My Documents

Document Center

Employee Summary Report

Employee Detail Report

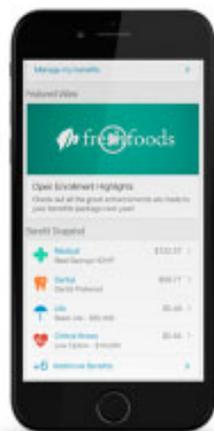


## Mobile App



**You manage some of the most important things in life on your phone. Your benefits are no different!**

- Enroll in your benefits and make updates during open enrollment
- Make qualified life event changes to your benefits any time
- Update your personal information
- Access an extensive library of educational videos
- Log in with secure, fingerprint authentication



### Download the app today!

1. Install the BENEFITFOCUS® App from Google Play or the Apple App Store.
2. Enter the company ID shown below.
3. Log into your benefits using the same username and password you use on your computer!

Company ID: PACIFICBENEFITS

Contact Human Resources for benefits and open enrollment questions at [employee\\_benefits@pacific.edu](mailto:employee_benefits@pacific.edu)

# Medical Benefits

## What to Keep in mind when electing a Medical Plan

- Where do you typically receive care and are those providers/hospitals part of a plan's network?
- Do you need a plan that allows access to non-network providers?
- What are the co-payments and deductibles?
- How much will biweekly premium costs be every paycheck?
- Do I want access to a Health Savings Account (HSA) as part of my strategy for saving for healthcare in retirement?

## Pacific Plans

### Pacific's EPO (Exclusive Provider Organization)

Pacific's EPO plan provides benefits when participants seek services from a provider in the Anthem network. It uses the full Anthem BlueCross Prudent Buyer PPO Network. There is no coverage for out of network services. For information regarding the plan details please view the Medical Comparison Chart .

### Pacific High Deductible PPO (QHDHP) with Health Savings Account

Pacific's QHDHP plan provides benefits when participants seek services from a provider in or out of the Anthem network. The level of coverage is higher for in-network providers than for out-of-network providers.

To be eligible for an HSA you must be enrolled in a QHDHP, cannot be enrolled in another non-QHDHP, cannot be claimed as an IRS dependent, cannot be enrolled in HSA and FSA in the same plan year, and cannot be enrolled in Medicare (including part A).

# Medical Benefits

HSA allows you to set aside tax-free dollars to pay for qualified health care expenses and earn tax-free interest. Unused dollars roll over into the next year; no use it or lose it rule. All contributions belong to you and you can take them and use them for your benefit if you leave Pacific. After age 65, dollars may be withdrawn for any purpose, paying only normal income taxes and no penalties. Monies can be used to pay for Medicare premiums (if automatically taken out of your social security check, you can reimburse yourself).

This is a great way to save for medical expenses in retirement!

The HSA associated with the Pacific QHDHP is administered by HSABank.

For information regarding the plan details please view the Medical Comparison Chart .

## Finding a Doctor

To find a provider please visit the [Anthem Blue Cross](#) webpage. On top of the page you will see “Find Doctor/Find Care”. Underneath the “Login” Button you will see an area to enter a Member ID Number or Prefix. You will enter “ DLU ” as the prefix and select “Search”. You can search by specialty, doctor name, or zip code. After entering this information, select the type of Providers you are searching for.

## Live Health Online

Provides easy, fast doctor visits from the comfort of your computer or mobile device. Free for Pacific EPO patients. Pacific QHDHP patients pay \$59 per "visit" until deductible is met. Services are provided seven days a week. Enroll at [livehealthonline.com](http://livehealthonline.com)

## Live Health Online Psychiatry

Faculty, staff, and their covered dependents who are enrolled in the Pacific EPO or the Pacific High Deductible plans will have access to LiveHealth Online Psychiatry.

# Medical Benefits

## Kaiser Plans

### Kaiser HMO

Kaiser offers integrated health care; doctors, nurses, specialists, and pharmacists are located in one location. All services must be with a Kaiser Provider. For information regarding the plan details please view the Medical Comparison Chart.

### Kaiser High Deductible HMO (QHDHP) with Health Savings Account (HSA)

Kaiser offers integrated health care; doctors, nurses, specialists, and pharmacists are located in one location.

Kaiser has a sample fee schedule for many of their services so you can manage your out of pocket costs. To be eligible for an HSA you must be enrolled in a QHDHP, cannot be enrolled in another non-QHDHP, cannot be claimed as an IRS dependent, cannot be enrolled in HSA and FSA in the same plan year, and cannot be enrolled in Medicare (including part A).

HSA allows you to set aside tax-free dollars to pay for qualified health care expenses and earn tax-free interest. Unused dollars roll over into the next year; no use it or lose it rule.

All contributions belong to you and you can take them and use them for your benefit if you leave Pacific. After age 65, dollars may be withdrawn for any purpose, paying only normal income taxes and no penalties. Monies can be used to pay for Medicare premiums (if automatically taken out of your social security check, you can reimburse yourself).

This is a great way to save for medical expenses in retirement! The HSA associated with the Kaiser QHDHP is administered by Kaiser.

For information regarding the plan details please view the Medical Comparison Chart

# Medical Benefits

## Finding a Doctor

To find a provider please visit [www.kp.org](http://www.kp.org). Click on New Member and proceed from there.



# Medical Benefits

## UNIVERSITY OF THE PACIFIC

### 2021 Medical Plan Design Comparison

Benefit Summary	Pacific Plan	Pacific Plan	Kaiser	Kaiser
	EPO	HDHP with HSA	Kaiser HMO Plan	Kaiser HMO HSA Plan
	<i>In-Network Only</i>	<i>In-Network</i>	<i>In-Network Only</i>	<i>In-Network</i>
<b>Lifetime Maximum</b>	Unlimited	Unlimited	Unlimited	Unlimited
<b>Calendar Year Deductible</b>	The deductible applies to all services below except Rx unless shown as waived (dw)	For Family Coverage, Family Ded must be satisfied before coinsurance applies		The deductible applies to all services below except preventive care
<i>Single</i>	\$500	\$2,500	None	\$2,800
<i>Family</i>	\$1,500	\$5,000	None	\$5,600
<b>Out-of-Pocket Maximum</b>		In and Out of Network are not combined		
<i>Single</i>	\$1,500	\$5,000	\$1,500	\$5,600
<i>Family</i>	\$4,500	\$10,000	\$3,000	\$11,200
<b>Physicians Services</b>				
<i>Office Visit</i>	\$25 copay-dw	10% after the ded	\$25 copay	20%
<i>Lab &amp; X Ray</i>	10% Standard \$100 + 10% MRI, CT, PET, etc	10% after the ded	No Charge	20%
<b>Preventive Care</b>				
<i>Preventive Care</i>	No charge	No Charge	No Charge	No Charge
<i>Lab,X-Ray</i>	No charge	No Charge	No Charge	No Charge
<b>Hospital</b>				
<i>In Patient</i>	\$250 copay + 10%	10%	\$100 per admission	20%
<i>Out Patient Surgery</i>	10%	10%	\$25 per procedure	20%
<b>Chiropractic Care</b>	\$25 -30 visits cy	10%-30 visits cy	\$15 - 30 visits cy	\$15 after ded-30 visits cy
<b>Emergency Room</b>	\$250 copay + 10% (copay waived if admitted)	10%	\$250 per visit (waived if admitted)	20%
<b>ER Physicians Services</b>	10%	10%	No Charge	20%
<b>Emergency Transportation</b>	10%	10%	No Charge	20%
	WellDyne Rx	WellDyne Rx	Kaiser Pharmacy	Kaiser Pharmacy
<b>Prescription Drug</b>	Ded above is waived - up to 30 day	up to 30 day supply	up to 30 day supply	up to 30 day supply
<i>Generic/ Tier 1</i>	\$15	\$10 copay once deductible is met	\$10	\$10 after the ded
<i>Brand Name/ Tier 2</i>	\$25	\$30 copay once deductible is met	\$20	\$30 after the ded
<i>Non Formulary/ Tier 3</i>	\$45	\$50 copay once deductible is met	N/A	N/A
<i>Specialty</i>	20% to \$150 copay max	30% coinsurance after deductible is met	20% to \$150 copay max	\$30 after the ded
<b>Mail Order Supply</b>	up to 90 day supply	up to 90 day supply	up to 100 day supply	up to 100 day supply
<i>Generic/ Tier 1</i>	\$15	\$10 copay after deductible	\$20	\$20 after the ded
<i>Formulary Brand / Tier 2</i>	\$25	\$60 copay after deductible	\$40	\$60 after the ded
<i>Non Formulary Brand / Tier 3</i>	\$45	\$100 copay after deductible	N/A	N/A

Out of Network claims are paid at a percentage of usual & customary and the provider can balance bill you for the difference between the billed and allowed amount.

The above is just a brief comparison of benefits.

For a detailed explanation of benefits, limitations and exclusions. Please refer to the booklet/contract

dw means deductible waived

# Medical Benefits

## 2021 Biweekly Contributions

Medical	Full-Time Employee		Part-Time Employee		San Francisco Union Full-Time Employee		San Francisco Union Part-Time Employee	
	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2
<b>Pacific PPO High Deductible with Health Savings Account</b>								
Employee	\$24.00		\$50.77		\$21.23		\$46.15	
Employee + 1	\$49.85	\$60.92	\$103.38	\$130.15	\$45.23	\$58.15	\$97.85	\$123.69
Employee + Family	\$70.15	\$80.31	\$146.77	\$169.85	\$65.54	\$74.77	\$140.31	\$162.46
<b>Pacific EPO</b>	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2
Employee	\$89.54		\$182.77		\$60.92		\$121.85	
Employee + 1	\$193.85	\$246.46	\$398.77	\$508.62	\$126.46	\$159.69	\$255.69	\$323.08
Employee + Family	\$326.77	\$395.08	\$682.15	\$825.23	\$181.85	\$209.54	\$367.38	\$423.69
<b>Kaiser HMO</b>	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2
Employee	\$35.08		\$72.00		\$48.59		\$100.80	
Employee + 1	\$68.31	\$84.00	\$140.31	\$175.38	\$94.60	\$117.86	\$200.57	\$251.74
Employee + Family	\$99.69	\$116.31	\$209.54	\$245.54	\$141.12	\$165.93	\$300.85	\$350.99
<b>Kaiser HMO High Deductible with Health Savings Account</b>	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2
Employee	\$0	\$0	\$48.00		\$0	\$0	\$42.39	
Employee + 1	\$0	\$0	\$96.92	\$121.85	\$0	\$0	\$84.78	\$108.55
Employee + Family	\$0	\$0	\$143.08	\$168.92	\$0	\$0	\$127.16	\$147.84

**Working Spouse Rate Option:** employees covering their spouse/domestic partner must check the following information to determine their contribution:

- Option 1: Employee's spouse/domestic partner does not have other coverage available.
- Option 2: Employee's spouse/domestic partner is eligible to participate in his/her own employer's medical plan but waives coverage in his/her employer's medical plan.
  - If your situation changes regarding a spouse/domestic partner, it is your responsibility to contact Human Resources within 31 days of the event so that the correct payroll deductions can be applied. Changes will be applied on a go-forward basis.
  - If both you and your spouse/domestic partner work for Pacific and you are enrolled together under the medical plan, Option 1 payroll deductions will apply
  - If you are covering a child or children under the medical plan and your spouse/domestic partner is not enrolled, Option 1 payroll deductions will apply

# Health Savings Account

## What is an HSA?

- With this plan, you pay a deductible first before the plan pays medical and prescription benefits. Preventive care is covered at 100% with no deductible.
- The plan limits the maximum amount of expenses you pay in any year. After your expenses reach that amount, you do not have to pay for any other health care expenses.
- Allows employees to set aside tax-free dollars to pay for qualified health care expenses\*
- Unused dollars roll over from year to year
- Account balances earn interest tax-free\*
- Employees own their HSA – it moves with them if they change jobs or health plans

## Who is Eligible?

- Employees must be enrolled in a qualified high-deductible health plan (QHDHP).
  - The two qualified HDHPs that Pacific offers are the Pacific High Deductible PPO and the Kaiser High Deductible HMO.
  - The QHDHP must have the following to be considered HSA-compatible:
    - A Minimum deductible of \$1,400 single/\$2,800 family
    - An annual out-of-pocket maximum which cannot exceed \$7,000 single / \$14,000 family
  - Employees must NOT be enrolled:
    - in another health plan unless it is a QHDHP
    - in Medicare or receiving Social Security benefits
    - or claimed as a dependent by anyone
- Please note: you cannot have a flexible spending account (FSA) and HSA at the same time.

# Health Savings Account

## How much can I contribute?

- Up to the IRS Limits
  - Individuals with Self-Only coverage are limited to \$3,600.00. This includes both the employee's contributions and the employer's contribution. Please see below for the employer's contribution.
  - Individuals with Family coverage are limited to \$7,200.00. This includes both the employee's contributions and the employer's contribution. Please see below for the employer's contribution.
  - HSA account holders 55 + are able to contribute a \$1,000 catchup in addition to the above.
- If employee enrolls mid-year and fund their HSA, they must remain enrolled through the following calendar year to avoid tax penalties. For more information regarding tax penalties please view the below section on tax penalties. You can also seek guidance from your tax advisor.

## Employer HSA Funding

	2021 IRS Maximum Annual Contribution	Annual Employer Contribution	Maximum Employee Contributions	Maximum Employee Contribution for ages 55+
Employee Only	\$3,600.00	\$1,250.00	\$2,350.00	\$3,350.00
Employee + Family	\$7,200.00	\$2,500.00	\$4,700.00	\$5,700.00

For employees never enrolled in an HSA prior to 2021, Pacific will prefund 3 months of the HSA the first paycheck of January, and then it will be pro-rated by paycheck beginning with the first paycheck in April.

- Single: \$288.48 pre-fund, then \$48.08 per pay period.
- Family: \$576.90 pre-fund, then \$96.15 per pay period

# Health Savings Account

## Managing Contributions

You are allowed to change your HSA contributions any time throughout the year. To make changes to your contributions you will need to log into the online benefit platform, BenefitFocus. Then you will click on the links shown below:

1. New Hire & Life Event Enrollments, HSA/Parking/Transit contribution changes, and view Benefit Summaries



2. UNIVERSITY OF THE PACIFIC

- Home
- Profile
- Benefits
- Dependents
- 2020 - University of the Pacific Annual Working Spouse Survey
- Language Preferences

**Manage Account**

- Login Information
- View HSA Contribution**
- Life Change

3.



# Health Savings Account

## Tax Savings

- Pre-tax contributions can be made via payroll\*
- Earnings are tax-free under Federal Tax Rules while the money remains in the HSA\*
- Withdrawals for qualified health care expenses are tax free
- HSA funds may transfer to the surviving spouse, tax free
- After turning 65, HSA dollars may be withdrawn for any purpose, paying only normal income taxes with no penalties.

\* Important Note: contributions and earned interest to an HSA are taxable income in California

## Long-Term Saving

- Save for future medical needs
- Unused balances roll over tax-free from year to year
- Variety of mutual fund investment options available once an account balance reaches the required minimum
  - Minimum balance requirements and fund options vary by HSA vendor
- Can serve as a “medical retirement fund”
  - Use to pay for medical services as well as long-term care services, Medicare not covered by any other source, COBRA or health insurance while you are receiving federal or state unemployment.



# Health Savings Account

## Visiting the Doctor

- Patients should notify their doctor's office that they have changed insurance plans to a high deductible health plan. Some providers, like Sutter, will not negotiate a cash price if they know you have insurance, even if it is a high deductible plan.
- Deductibles are waived for routine preventive care and should be covered at 100% as long as the provider bills them as routine preventive care.
  - All other expenses are subject to the plan deductible, including prescriptions
- Patients are not required to pay at the time of their visit, but some providers, like hospitals, may require the deductible to be paid.
- Patients should request that their doctor submit their claim to their insurance provider first.

## Qualified HSA Expenses

- Acupuncture
- Ambulance
- Birth Control Pills
- Braces
- Chiropractor
- Contact Lenses
- Contraceptive Devices
- Dentures
- Dermatologist
- Eye Glasses
- Hearing Aids / Batteries
- Insulin Treatment
- Lab Tests
- Lodging / Transportation Cost (relative to health care)
- Wheelchair
- Medicare Parts A, B or D after age 65

For more information, see IRS Publication 502-Medical and Dental Expenses (section 213(d)) or consult your tax consultant.

# Health Savings Account

## Paying for Services

- The insurance provider will process each claim and send an Explanation of Benefits (EOB).
- The EOB will reflect the provider's discounted rates, which they will write off, and it will show the patient's responsibility for that claim.
- Employees may pay their bill (or the bill for any person declared as a dependent on their tax return) by using their:
  - HSA debit card
  - Paying the provider directly and submitting a paper claim for reimbursement
  - Or pay from other personal accounts to allow their HSA balance to grow

\*\*Note: Patient assumes responsibility for legitimizing reimbursed expenses and should keep copies of their receipts.

## Tax Penalty

- Distributions from an HSA, not used exclusively for qualified medical expenses, are includable in your gross income and may be subject to an additional 20% penalty tax.
- Distributions made for expenses that are reimbursed by another health plan are includable in your gross income, whether or not the other health plan is a high-deductible health plan.

# Vision

## Vision Service Plan

To help keep your life in focus, vision benefits are provided through Vision Service Plan (VSP) for employees and their qualified dependents that are enrolled in any of the medical plans that the University provides. Please note that you must enroll in a medical plan to be enrolled in the University's vision plan. If you decide to waive medical coverage, you will also waive vision. Using VSP Choice Network Providers allows you to maximize your benefit offering. Save money by using in-network providers.

- Patients can pay the provider directly and submit a claim to VSP for reimbursement, using the following procedure:
  1. Visit the Benefits & Claims section of [vsp.com](http://vsp.com) to begin your claim.
  2. Complete the claim form. Make sure you have a copy of your itemized receipt or statement that includes:
    - Doctor name or office name
    - Name of Patient
    - Date of Service
    - Each service received and the amount paid
  3. After completing the claim form, you may attach your receipt(s) or print and mail copies of your claim form and receipt(s) to:

VSP  
P.O. Box 385018  
Birmingham, AL 35238-5018

\*\*Please note that claims for reimbursement must be filed within 12 months of the date of service. Patients will be reimbursed according to the out-of-network reimbursement schedule.

# Vision

## Finding a Doctor

To find an ophthalmologist in network please visit [vsp.com](http://vsp.com) and select “Find a Doctor”.

### 2021 Biweekly Contributions

Vision	Full-Time Employee	Part-Time Employee	San Francisco Union Full-Time Employee	San Francisco Union Part-Time Employee
<b>Vision Service Plan - covered by Kaiser High Deductible HMO</b>				
Employee	\$0.00	\$0.92	\$0.00	\$0.92
Employee + 1	\$0.00	\$1.85	\$0.00	\$1.85
Employee + Family	\$0.00	\$2.77	\$0.00	\$2.77
<b>Vision Service Plan - covered by any other medical plan</b>				
Employee	\$0.92	\$0.92	\$0.92	\$0.92
Employee + 1	\$1.85	\$1.85	\$1.85	\$1.85
Employee + Family	\$2.77	\$2.77	\$2.77	\$2.77



# Dental

Pacific offers two dental plan choices. You have the option to enroll in the Delta Dental PPO plan or the DeltaCare® USA DHMO plan. You do not have to be enrolled in a medical plan in order to select dental benefits. Your covered dependents for dental may be different from the choice you made for medical.

## Delta Dental PPO

The Delta Dental PPO plan offers flexibility as well as dentist choice. You may choose any dentist for treatment, but it is to your advantage to choose a Delta Dental PPO dentist when obtaining care to enjoy the lowest out-of-pocket costs.

Please view the Delta Dental PPO brochure for more information.

## DeltaCare® USA DHMO

The DeltaCare® USA plan features set copayments so that you always know what your out-of-pocket costs will be. There are no annual deductibles, no maximums for covered benefits and no waiting periods including orthodontic benefits. It is only available to California Residents.

Please view the DeltaCare® USA DHMO brochure for more information.

## Find a Dentist

To find a Dentist covered by your Dental Insurance please visit [www.deltadentalins.com](http://www.deltadentalins.com). Scroll down to “Find a dentist”. You will enter your zip-code and the network you have. After selecting, “Find a dentist,” it will show you a list.



# Dental

## Comparison Chart

Below is a comparison chart that compares both Delta Dental PPO and DeltaCare USA DHMO. You can also view the [Delta Dental Video](#) for comparison information.

UNIVERSITY OF THE PACIFIC		
2021 Dental Plans		
	Delta Care USA - must reside in CA <i>In-Network Only</i>	Delta Dental PPO <i>Delta Dental PPO / Out of Network Dentist</i>
<b>Calendar Year Deductible:</b>		Delta dentist include PPO and Premier dentist
Single	\$0	\$50
Family	\$0	\$150
Waived for Type I services:	N/A	yes
<b>Calendar Year Maximum:</b>		
Per Person	N/A	\$2,000 (Type I services do not apply to this maximum with Delta PPO Dentist)
<b>Services:</b>		*out of network dentist are paid on Delta Dental maximum charge so balance billing may occur
<b>Type I - Preventive</b> (does not apply to Cal Yr Max)	No cost (1 cleaning per 6 month period)	100% / 100%*
<b>Type II - Basic</b> (fillings, simple extractions, sealants, endodontics (root canals), periodontics (gum treatment))	Fee Schedule applies	90% / 90%*
<b>Type III - Major</b> (crowns, inlays, bridges, dentures, implants)	Fee Schedule applies (examples: crown-full cast noble metal \$150, crown-porcelain/ceramic \$240)	60% / 60%*
<b>Orthodontia:</b>		
Dependent child to age 19	Approximately \$1700 in copays	50%
Adult	Approximately \$1900 in copays	50%
Lifetime Maximum Per Covered Person:	see approximate copays above	\$2,000
<b>Waiting Periods:</b>		
Orthodontia	None	6 months

Out of Network claims are based on Delta Dental maximum contract allowances and not necessarily each dentist's submitted fees. The above is just a brief comparison of benefits. Refer to your dental certificate for full benefits.

## 2021 Biweekly Contributions

Dental	Full-Time Employee	Part-Time Employee	San Francisco Union Full-Time Employee	San Francisco Union Part-Time Employee
<b>Delta Dental PPO</b>				
Employee	\$10.15	\$12.00	\$5.54	\$11.08
Employee + 1	\$17.54	\$24.92	\$14.77	\$21.23
Employee + Family	\$24.92	\$31.38	\$18.46	\$28.62
<b>DeltaCare USA DHMO **</b>	<b>**available in CA only and a very narrow network</b>			
Employee	\$0	\$0	\$0	\$0
Employee + 1	\$0	\$0	\$0	\$0
Employee + Family	\$0	\$0	\$0	\$0

# Flexible Spending Accounts (FSA)

A Flexible Spending Account (FSA) is an effective way to save when paying for certain health care, dependent day care and transportation expenses. You decide how much you want to set aside to pay for eligible expenses incurred during the plan year and make separate elections for each account. Trustmark is our vendor that administers all of our Flexible Spending Accounts. The IRS has different maximum contribution limits for each account. These amounts will be posted on our Benefits Website as soon as IRS publishes them. The plan year runs from January 1st through December 31st.

## Medical / Dependent Care Spending Account

	Healthcare FSA	Dependent Care FSA
<b>What is covered?</b>	In general, health-related expenses that are not covered by your medical plan	In general, dependent care expenses that allow you to work
<b>Eligible Expenses</b>	Examples include: <ul style="list-style-type: none"> <li>• Out-of-pocket costs</li> <li>• Deductibles and copays</li> <li>• Healthcare expenses approved by the IRS not covered by your plan</li> <li>• Over-the-counter drugs prescribed by a physician</li> </ul>	Examples include: <ul style="list-style-type: none"> <li>• Childcare for children under age 13</li> <li>• Adult dependent daycare</li> <li>• Dependent daycare centers</li> <li>• Preschool expenses</li> </ul>
<b>For more information, see the common eligible and ineligible expenses</b>		
<b>Restrictions</b>	<ul style="list-style-type: none"> <li>• Medical expenses that are not deductible per the IRS may not be reimbursed</li> <li>• Over-the-counter drugs not prescribed by a physician are ineligible</li> </ul>	Expenses reimbursed under this FSA may not be claimed as a federal tax credit on your tax return
<b>Access to Funds</b>	Immediate access to annual election	Access funds only as they are contributed per payroll

# Flexible Spending Accounts (FSA)

## Medical FSA: Use It or Lose It

IRS regulations require that, at the end of a plan year, the actual expenses you incur equal the amount you contribute to an FSA or you lose contributions. Pacific allows a rollover of up to \$550; you must forfeit the excess amount. Therefore, it is important that you make your FSA elections carefully. Rollover funds are available April 1.

There is a run out period for the Health FSA from January 1, 2021 through March 31, 2021 where you can submit claims that were incurred from 1/1/2020 - 12/31/2020 for reimbursement. Trustmark must receive them no later than March 31, 2021.

If you terminate employment at Pacific, your FSA Health Care Debit Card will become inactive on the date of termination, but you have 90 days from the termination date to submit claims to Trustmark as long as the claims were incurred prior to your termination date. The FSA may be continued through COBRA if eligible. Please contact the Benefits Team to determine eligibility.

## Dependent Care FSA: Use It or Lose It

Unlike the Medical FSA, none of your contributions towards your Dependent Care Spending Account, will roll over to the next plan year.

If you terminate employment at Pacific or cease to be eligible for Dependent Care, you have 90 days from your termination or ineligibility date to submit your claims.

# Flexible Spending Accounts (FSA)

## Qualified Transportation / Parking

The commuter plan allows eligible employees to set aside pre-tax dollars for eligible transit and parking expenses related to commute to work, governed by IRC Section 132. You can enroll or cancel at any time throughout the year; you do not have to elect during Open Enrollment. The minimum dollar amount of contributions you can elect is \$1 per pay period. Employees have access to their account as long as they are an active benefit eligible employee. If a participant has both a parking and transit account, each account is entirely separate, and funds cannot be transferred from one to the other.

Transit and /or parking benefits are limited to employee expenses only; reimbursement is not allowed for spouse or dependent expenses.

### Elections and Spending

- The IRS sets maximum monthly pre-tax deduction amounts and could adjust annually
- Employees can change elections monthly
- Unused amounts can be carried over to the next plan year
- Contributions are available for reimbursement based on payroll deduction cycle
- Contributions are loaded to the WEX prepaid benefits card

## WEX Prepaid Benefit Card

Contributions are loaded to the WEX prepaid benefits card. Use the WEX card for eligible items at merchants that accept MasterCard®. Expenses are deducted from the account balance at point of sale.

# Flexible Spending Accounts (FSA)

## How the WEX Card Works with Commuter Benefits

The Card maintains separate accounts of pre-tax money for parking and transit and directs the card transaction to the appropriate account based on the Merchant Category Code (MCC) at the point of sale. The Card cannot be used at alternative outlets such as liquor stores, restaurants, and grocery stores.

Additional validation is performed to ensure that the account is active and there is sufficient funds to cover the transaction. The amount of available funds must cover the entire transit or parking expense or the transaction will be declined. The transaction may split the cost by swiping the Card for the exact available amount and then pay for the remaining amount with an alternate form of payment.

## Using the Card for Parking

The Card can be used for expenses such as parking expenses for any type of vehicle you use to go to work at any parking location near your work location or near a location from which you commute using mass transit. Please note: this is not to be confused with an onsite parking pass that is payroll deducted separately.

Parking MCCs are:

- 7523 – Automobile Parking Lots and Garages



# Flexible Spending Accounts (FSA)

## Using the Card for Transit

The Card can be used for mass transit passes, tokens, or fare cards purchased at a valid transit fare terminal.

Transit MCCs are:

- 4011 – Railroads
- 4111 – Transportation – suburban and local commuter passenger, including ferries
- 4112 – Passenger Railways
- 4131 – Bus lines
- 4789 – Transportation services not elsewhere classified

## **Trustmark**

Below are the available resources for you in regards to the Flexible Spending Accounts. You can view these documents on our [FSA webpage](#).

- How to register to Trustmark
- How to login to the FSA portal
- Card- how to register the benefit card
- FSA Q&A
- Dependent Care flyer
- Commuter benefits
- Mobile App
- FSA Eligible Expenses
- HealthCare and Dependent Care Reimbursement Form
- Transit and Parking Reimbursement Form

For questions about your Flexible Spending Accounts contact Trustmark at 800.832.3332.

# Flexible Spending Accounts (FSA)

## 2021 IRS Maximum Contributions

<u>Flexible Spending Coverage</u>	<u>2021 Flexible Spending</u>
Health Care Flexible Spending Account	\$2,750 annual max
Dependent Care Spending Account	\$2,500 single or \$5,000 married annual max
Transit Spending Account	\$270 monthly max
Parking Spending Account	\$270 monthly max

## Trustmark Now Available in Spanish/Español

Users are now able to access their [myTrustmarkBenefits](#) portal in Spanish as well as English! Changing the portal language is very easy; users just need to click the “Español” link at the top right of their login screen.

Los usuarios ahora pueden acceder a su portal [myTrustmarkBenefits](#) en español y en inglés! Cambiar el idioma del portal es muy sencillo; los usuarios solo necesitan hacer clic en el enlace "Español" en la parte superior derecha de la pantalla de inicio de sesión.

The screenshot shows the Trustmark Health Benefits login page. At the top right, there is a language selection menu with "Español" and "English" options. A red arrow points to the "Español" link. The page is divided into three main sections: "Iniciar sesión" (Login), "Registrarse" (Register), and "Proveedor" (Provider). Each section has a "CREE SU CUENTA" button. The "Registrarse" section is further divided into "Integrante" (Member), "Empleador/Cliente" (Employer/Client), and "Agente" (Agent). The "Proveedor" section is for providers. The "Iniciar sesión" section has fields for "Nombre de usuario" and "Contraseña" and an "ENVIAR" button. There are also links for "¿Olvidó su contraseña?" and "¿Olvidó su nombre de usuario?".

# Qualifying Life Events

## Qualifying Life Event Chart (QLE)

The QLE chart, on the next two pages, shows the eligible events for benefit changes. For more information you can also visit our [QLE Webpage](#).



# Qualifying Life Events (1 of 2)

Life Event	Medical, Dental, or Vision	Employee Life and AD&D	Spouse Life and AD&D
<b>Gain of Spouse/Domestic Partner</b> <ul style="list-style-type: none"> <li>● Marriage</li> <li>● Registered Domestic Partner</li> </ul>	May add new or existing dependents. May revoke or decrease only when spouse/domestic partner benefits become effective or increased under spouse/domestic partner's plan. Must provide legal proof of marriage or partnership. All changes must be made within 31 days of event.	N/A must wait for open enrollment	May add coverage for spouse/domestic partner. Evidence of insurability may be required. All changes must be made within 31 days of event
<b>Loss of Spouse/Domestic Partner</b> <ul style="list-style-type: none"> <li>● Divorce</li> <li>● End of Domestic Partnership</li> <li>● Legal Separation</li> <li>● Annulment</li> <li>● Death</li> </ul>	Must stop coverage only for spouse/domestic partner. May elect coverage for self or dependents who lose coverage under spouse/domestic partner's plan. All changes must be made within 31 days of event.	N/A must wait for open enrollment	Must cancel spouse/domestic partner coverage immediately; however, legally separated is still covered.
<b>Gain Dependent</b> <ul style="list-style-type: none"> <li>● Birth</li> <li>● Marriage</li> <li>● Registered Domestic Partnership</li> <li>● Adoption</li> <li>● Court Appointed</li> </ul>	May elect or add coverage for new or existing dependents who were not previously covered. Must provide legal proof of marriage or partnership. All changes must be made within 31 days of event.	N/A must wait for open enrollment	May add coverage for spouse/domestic partner. Evidence of insurability may be required.
<b>Loss of Dependent</b> <ul style="list-style-type: none"> <li>● Death</li> <li>● Loss of Dependent Status</li> </ul>	Must stop coverage only for the dependent who loses eligibility. All changes must be made within 31 days of event.	N/A must wait for open enrollment A	Must stop coverage for the spouse/domestic partner who loses eligibility. May be able to convert policy.
<b>Gain in Employment Status</b> <ul style="list-style-type: none"> <li>● Temp Casual to benefit eligible</li> </ul>	May add coverage for employee, spouse/domestic partner, or dependents within 31 days of event.	May add coverage for employee within 31 days of event. Evidence of insurability may be required. All changes must be made within 31 days of event	May add coverage for spouse/domestic partner. Evidence of insurability may be required.
<b>Reduction in Employment Status</b> <ul style="list-style-type: none"> <li>● Full time to part time</li> </ul>	May cancel coverage within 31 days of event.	N/A	N/A
<b>Spouse/Domestic Partner or Dependent Gain in Employment or Other Changes in Employment that Affects Benefit Status</b>	May cancel or decrease election for employee, spouse/domestic partner, or dependent coverage with proof of coverage elsewhere. All changes must be made within 31 days of event..	N/A must wait for open enrollment	N/A must wait for open enrollment
<b>Termination of Employment for Employee or Loss of Benefit Eligibility Due to Change in Employee Class</b>	Coverage continues through the end of the month then will be offered COBRA continuation or retiree benefit options.	Coverage ends on date of termination or date no longer eligible. Policy may be portable.	Coverage ends on date of termination or date no longer eligible. Policy may be portable.
<b>Termination of Employment for Spouse/Domestic Partner/Dependent or Loss of Benefit Eligibility Due to Change in Employee Class</b>	May enroll any eligible dependent and all existing dependents who were not previously covered under Pacific's group but were covered under a spouse/domestic partner's group plan. All changes must be made within 31 days of event.	N/A must wait for open enrollment	N/A must wait for open enrollment
<b>Dependent No Longer Meets Eligibility Requirements</b> <ul style="list-style-type: none"> <li>● Attains age 26</li> <li>● Eligible for own coverage under Pacific's plan</li> </ul>	Must stop coverage only for affected dependent. Coverage will continue through the end of the month. If dependent reaches age 26, COBRA continuation of benefits will be offered.	N/A	If spouse/domestic partner elects coverage for self as a Pacific employee the other spouse/domestic partner cannot also cover as a dependent.

# Qualifying Life Events (2 of 2)

Life Event	Child Life and AD&D	Health Care FSA	Dependent Care FSA	Health Savings Account
<b>Gain of Spouse/Domestic Partner</b> <ul style="list-style-type: none"> <li>● Marriage</li> <li>● Registered Domestic Partner</li> </ul>	May start coverage for child.	May start or increase election for newly eligible dependents or decrease election if employee or dependent become eligible under new spouse's plan.	May start or increase election to accommodate new dependents. May cancel or decrease election if spouse if not employed or participates in Dependent Care FSA under their employer group plan.	May increase, decrease or cancel contributions if enrolled in a HDHP. If your status changes from single to family, HSA contributions will change on the first day of the month that family coverage was elected.
<b>Loss of Spouse/Domestic Partner</b> <ul style="list-style-type: none"> <li>● Divorce</li> <li>● End of Domestic Partnership</li> <li>● Legal Separation</li> <li>● Annulment</li> <li>● Death</li> </ul>	Must cancel coverage for child of spouse/domestic partner that is not a legal dependent of employee immediately. Legal documentation may be required. Coverage still in effect as legally separated	May decrease election	May start, increase, decrease or cancel election.	May increase, decrease or cancel contributions if enrolled in a HDHP. The HSA owned by one spouse may be divided or given to the other spouse by court judgment in a divorce.
<b>Gain Dependent</b> <ul style="list-style-type: none"> <li>● Birth</li> <li>● Marriage</li> <li>● Registered Domestic Partnership</li> <li>● Adoption</li> <li>● Court Appointed</li> </ul>	May start coverage for new child	May start or increase election	May start or increase election	May increase, decrease or cancel contributions if enrolled in a HDHP. If your status changes from single to family, HSA contributions will change on the first day of the month that family coverage was elected.
<b>Loss of Dependent</b> <ul style="list-style-type: none"> <li>● Death</li> <li>● Loss of Dependent Status</li> </ul>	Must stop coverage for the child who loses eligibility.	May decrease or cancel election	May decrease or cancel election	May increase, decrease or cancel contributions if enrolled in a HDHP.
<b>Gain in Employment Status</b> <ul style="list-style-type: none"> <li>● Temp Casual to benefit eligible</li> <li>● Part time to full time</li> </ul>	May add coverage for child.	May start or increase election	May start or increase election	May start or increase contributions if enrolled in a HDHP.
<b>Reduction in Employment Status</b> <ul style="list-style-type: none"> <li>● Full time to part time</li> </ul>	N/A	N/A	May decrease election	May increase, decrease or cancel contributions if enrolled in a HDHP.
<b>Spouse/Domestic Partner or Dependent Gain in Employment or Other Changes in Employment that Affects Benefit Status</b>	N/A must wait for open enrollment	May cancel or decrease election	May decrease or cancel election	May increase, decrease or cancel contributions if enrolled in a HDHP.
<b>Termination of Employment for Employee or Loss of Benefit Eligibility Due to Change in Employee Class</b>	Coverage ends on date of termination or date no longer eligible. Policy may be able to port or convert.	Participation ends on date of termination or date no longer eligible. Only claims incurred during participation may be eligible for reimbursement. COBRA continuation may be offered.	Participation ends on date of termination or date no longer eligible. Services incurred through the end of the year are eligible for reimbursement.	Participation ends on date of termination or date no longer eligible. You may use your HSA to pay for COBRA premiums.
<b>Termination of Employment for Spouse/Domestic Partner/Dependent or Loss of Benefit Eligibility Due to Change in Employee Class</b>	N/A must wait for open enrollment	May start or cancel election	May start or cancel election	May increase, decrease or cancel contributions if enrolled in a HDHP.
<b>Dependent No Longer Meets Eligibility Requirements</b> <ul style="list-style-type: none"> <li>● Attains age 26</li> <li>● Eligible for own coverage under Pacific's plan</li> </ul>	Must stop coverage for the child who loses eligibility. Policy may be able to port or convert.	N/A	N/A	May increase, decrease or cancel contributions if enrolled in a HDHP.
<b>Enroll in Medicare even Part A</b>	N/A	N/A	N/A	Must stop contributions immediately.

# Life Insurance

## **Supplemental Life and AD&D**

Because your lifestyle is unique, your life insurance needs are as well. Pacific provides an opportunity to purchase additional life insurance for you and your family with our new vendor Symetra. The amount of coverage needed is a personal decision. Many factors are involved when making the decision to purchase additional coverage; age, whether or not you have dependents, other financial resources available, and your debts.

## **Employee Supplemental Life and AD&D Benefit**

Coverage is equal to one, two, three, four or five times your base annual salary rounded up to the next \$1,000; not to exceed the maximum coverage of \$1,000,000. Guaranteed issue is \$500,000. The monthly rate is based on amount selected and your age.

If you are already enrolled in Employee Supplemental Life, a 1 level increase is allowed without Evidence of Insurability so long as the elected amount does not exceed the Guarantee Issue Level or 3x the annual salary. If you are Enrolling for the first time an Evidence of Insurability is required.

Any benefit amounts subject to Evidence of Insurability are not effective until approved in writing by Symetra.

Evidence of Insurability is required for all amounts of insurance selected after the initial 31 day eligibility period and for any amount in excess of the Guarantee Issue amount.

# Life Insurance

## Spouse/Domestic Partner Supplemental Life and AD&D

You may purchase in increments of \$10,000 to a maximum \$50,000. Guaranteed issue is \$20,000. The monthly rate is based on amount selected and age.

Employee must enroll in Supplemental Life and AD&D coverage to elect Supplemental Life and AD&D for spouse/domestic partner.

A 1-level increase of \$10,000 is allowed without Evidence of Insurability so long as the elected amount does not exceed the Guarantee Issue Level or 100% of the employee's Supplemental Life Coverage. If electing for the first time, Evidence of Insurability is required. Any benefit amounts subject to Evidence of Insurability are not effective until approved in writing by Symetra.

Evidence of Insurability is required for all amounts of insurance selected after the initial 31 day eligibility period and for any amount in excess of the Guarantee Issue amount.

\*\*The amount of coverage cannot be greater than the employee benefit.

### 2021 Biweekly Contributions

Employee or Spouse/Domestic Partner Supplemental Life and AD&D			
Age	Rate per \$1,000 of coverage	Age	Rate per \$1,000 of coverage
<25	\$0.029	50 - 54	\$0.116
25 - 29	\$0.028	55 - 59	\$0.193
30 - 34	\$0.031	60 - 64	\$0.268
35 - 39	\$0.042	65 - 69	\$0.398
40 - 44	\$0.056	70 - 74	\$0.790
45 - 49	\$0.079	75+	\$0.961

## Reduction Schedule Employee and Spouse/Domestic Partner

When you reach age 70, life benefits reduce to 65%

When you reach age 75, life benefits reduce to 50%

## Important Note for Spouse/Domestic Partners Who are Both Employed by Pacific

If Pacific employs both you and your spouse, you may cover yourself under Employee Supplemental Life and AD&D or your spouse may cover you under Spouse Life and

AD&D, however; employees may not be covered as both an employee and a spouse. Page | 41

# Life Insurance

## Dependent Child Supplemental Life and AD&D

Supplemental child coverage is equal to \$5,000, \$10,000 or \$20,000, if under age 26.

Guaranteed issue is \$20,000. The bi-weekly rate is based on amount selected.

Employee must enroll in Supplemental Life and AD&D coverage to elect Supplemental Life and AD&D for child.

\*\*The amount of coverage cannot be greater than the employee benefit.

### 2021 Biweekly Contributions

#### Dependent Child Supplemental Life and AD&D

Coverage Amount	Cost per payperiod
\$5,000	\$0.21
\$10,000	\$0.42
\$20,000	\$0.84



# Retirement Savings Benefits

Pacific's retirement plan through TIAA helps faculty and staff build financial security through a generous plan, employee funded tax-deferred savings opportunities, along with educational and planning resources to help you understand and make wise choices.

## **403 (b) Group Retirement Annuity Plan (GRA)**

Pacific's GRA is designed to make saving for your retirement years simple and convenient. This is a mandatory plan and, when eligible, are required to contribute 5% of your gross earnings. The 10% employer contribution is on hold for Fiscal Year 2021. You cannot change the amount of this mandatory contribution but there are other options to contribute (see the GSRA plan below). You are immediately vested so all contributions belong to you. Your contribution is made on a pre-tax basis and is automatically invested in the Lifecycle Fund based on your projected retirement age.

### Eligibility:

- Exempt Employees- 1 consecutive year of service with Pacific
- Non-Exempt Employees- 1 consecutive year of service and 1,000 hours of service with Pacific
- Waiting Period Waived- 1 year of eligible service with an institution of higher education during the 24-month preceding the date of service with Pacific may satisfy service requirement.
- At least age 21, and
- Not part of an excluded class of employees - reach out to the Benefits Team for more information

# Retirement Savings Benefits

## **403 (b) Group Supplemental Retirement Annuity Plan (GSRA)**

The GSRA provides an easy way to add to your retirement savings while decreasing income tax when you make pretax contributions. You may also make post-tax contributions to the Roth 403(b). You may enroll or make changes anytime by visiting [www.tiaa.org/pacific](http://www.tiaa.org/pacific).

The maximum annual contributions will be posted when the IRS publishes them.

### Employees who participate in an outside plan:

Employees must combine contributions made to their 403(b) accounts with contributions made to all other plans in which they participate (other than 457 plans): 401(k) and other qualified plans, and SIMPLE IRAs. The employee's total elective deferrals to all of these plans combined cannot exceed the IRS annual deferral limit. For more information please refer to IRS Publication 571.

## **Schedule a Session with TIAA**

No matter where you are in life – just getting started or planning for retirement – an individual session with a TIAA Financial Consultant can help you create a plan for your goals. And, it's at no additional cost as part of your retirement plan. Register for one of the individual sessions at [www.tiaa.org/schedulenow](http://www.tiaa.org/schedulenow).

### Now Available in Spanish / Ahora Disponible en Español

Para comunicarse con un consultor financiero de TIAA, regístrese en línea en [TIAA.org/schedulenow](http://TIAA.org/schedulenow) o llame al 626-432-6300, los días de semana de 9 a. m. a 5 p. m.

# Disability Insurance Plan

## Short-Term Disability

All California employees, except student employees, are required to participate in a disability plan. Pacific employees are automatically enrolled in California State Disability Insurance (SDI). SDI is a partial wage-replacement plan that contains provisions for Short-Term Disability (STD) and Paid Family Leave (PFL) and funded through employee payroll deduction. If you do not live in California please contact the Benefits Team to find out if your state offers a Short-Term Disability plan.

### How It Works

SDI will pay 60% of earnings up to the maximum weekly benefit. A 7-day waiting period applies.

PFL provides income (up to eight weeks within any 12-month period) to employees who take time off work to care for their seriously ill child, spouse, parent, or to bond with a new child. PFL benefits will be paid up to the maximum weekly benefit.

Employees who are on short-term disability or receiving Workers' Compensation benefits are not eligible to receive the PFL benefit.

### For More Information

For more information regarding leave of absence, visit our [Benefits Webpage](#) Click *Income Protection* on the left hand side then *FMLA & Other Leave Information* or review the Faculty Handbook.

# Disability Insurance Plan

## **Long-Term Disability (LTD)**

The impact of a disabling illness or injury, both financially and emotionally, is devastating. While health insurance may cover most medical bills, daily living expenses such as rent or mortgage, car payments, and utilities continue. Disability insurance provides partial income replacement if you are unable to work due to a qualifying non-occupational illness or injury. You generally begin with short-term disability for a period of 13 or 26 weeks; if the illness or injury extends beyond that period it becomes long-term disability. Our Long-Term Disability is now with our new vendor, Symetra.

### How It Works

You and Pacific share in the cost of the mandatory LTD plan. Pacific's LTD plan provides a monthly benefit after you have been totally disabled for 180 days. Benefits continue while you are totally disabled or until you reach the maximum benefit period based on your age at the time of disability. The monthly benefit amount, when combined with income from all other sources (including Social Security, California State Disability or Sick Leave) will equal 60% of your base pay up to a maximum monthly benefit of \$6,000. You must provide proof of continued disability on a regular basis to continue to receive benefits. All disability payments you receive are non-taxable income.

### Definition of Disability

You are disabled when the insurance carrier determines that you are limited from performing the material and substantial duties of your regular occupation due to your sickness or injury, and you have a 20% or more loss in your indexed monthly earnings due to the same sickness or injury. After 24 months of payments, you are disabled when the insurance carrier determines that due to the same sickness or injury, you are unable to perform the duties of any gainful occupation for which you are reasonably fitted by education, training or experience.

# Tuition Remission

The purpose of this program is to enable an employee, spouse/domestic partner, or eligible children of an employee of Pacific to attend University of the Pacific with reduced tuition. Tuition remission does not apply to course fees or other applicable fees such as the health fee, student association fee, or other similar fees. Newly established academic programs are not eligible for tuition remission. Eligibility shall be determined solely by the University.

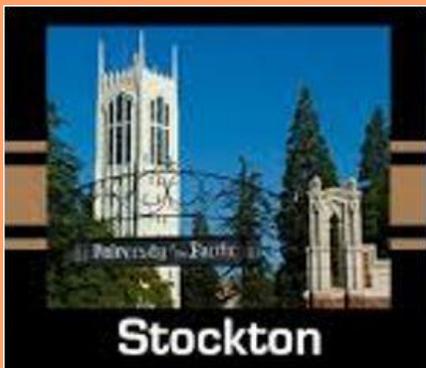
## Overall Program Components

- Eligibility for tuition remission is effective the beginning of the semester following one year of employment subject to other requirements stated within the policy.
- To apply please fill out a Tuition Remission Application and send it to [employee\\_benefits@pacific.edu](mailto:employee_benefits@pacific.edu) . If it is approved, the Tuition Remission will be applied on the first day of classes of the semester you applied for. Any questions regarding payments please contact Student Accounts.
- In the event the faculty member or staff employee is employed part-time, tuition remission benefits are granted according to provisions outlined within the policy, in direct proportion to the amount of time employed during the fiscal year.
- If an employee terminates employment, any tuition remission approved for the employee and his or her spouse/domestic partner and/or eligible children prior to the employee's termination will be granted for the duration of the current semester, provided the employee has worked at least five (5) weeks into the current semester at the time of termination. If not, the amount owed for tuition is prorated from the date of termination until the end of the semester.
- Tuition remission does apply to degree programs at University of the Pacific's Stockton Campus and McGeorge School of Law but does not apply to Pacific's Arthur A Dugoni School of Dentistry, Lifelong Learning Courses or workshops.

# Tuition Remission

- After the one-year waiting period, full-time or part-time staff may take classes during normal duty hours if a modified work schedule is arranged and approved by the appropriate vice-president. However, the work schedule must be developed so that the best interests of the University are served. Compensation is based on hours worked.
- In the event of death or disability of an eligible employee with ten years of service, the tuition remission program shall remain operative for the eligible children and spouse/domestic partner.
- If a tenured faculty member or staff employee retires after age fifty-five with at least twenty years of University service; the tuition remission program shall remain operative for spouse/domestic partner and eligible children.
- Eligible children attending a Pacific sponsored undergraduate overseas program or school exchange will be eligible for tuition remission at the University's tuition rate in the same proportion.
- When students receive other sources of payment for tuition (scholarships, grants, assistantships, etc.) the total combined with tuition remission will not exceed 90%.

Please see the full [Tuition Remission Policy](#) for details of tuition reduction.



# Additional Benefits

## California Casualty

California Casualty offers Pacific employees exclusive auto and home insurance benefits that could fit your budget. They offer competitive rates, discounts and other online account services. All insured members receive free ID theft coverage. For more information or to request a quote contact them at 877.654.9316 or [www.calcas.com/arajczyk](http://www.calcas.com/arajczyk)

## Employee Assistance Program (EAP)

Recognizing that life events do not always go as planned, Pacific offers the *Employee Assistance Program (EAP)* through Symetra to help you and your family members cope with problems and stress at work and at home.

You and eligible family members can meet face-to-face with a counselor, financial planner or attorney for expert, confidential information and guidance. Your household is eligible for a total of five sessions per calendar year, plus an additional five with a covered disability claim. In California, counseling services are limited to three in a six month period. There is no additional cost for this benefit.

To contact the Employee Assistance Program, 24/7 Member Services Line, simply call 1.888.327.9573 and you may be guided to a counselor in your vicinity for confidential assistance.

All EAP services are under one virtual roof, offering content, self-assessment, interactive tools and educational guides for you and your family to utilize. You can visit [guidanceresources.com](http://guidanceresources.com).

# Additional Benefits

## Offered through EAP

### Achieve well-being

- Stress
- Mental health concerns
- Grief and loss
- Crisis situations

### Improve nutrition

- Weight management
- High Cholesterol and blood pressure
- Diabetes

### Deal with workplace challenges

- Stress
- Performance
- Work-life balance

### Tackle addictions

- Alcohol
- Drugs
- Tobacco
- Gambling

### Focus on your physical health

- Understand symptoms
- Identify conditions
- Improve sleep

### Manage relationships and family

- Communication
- Separation/divorce
- Parenting

### Find child and elder care resources

- Child care
- Schooling
- Nursing/retirement homes

### Receive financial guidance

- Debt management
- Bankruptcy
- Retirement

### Get legal advice

- Family law
- Separation/divorce
- Custody

# Additional Benefits

## A Helping Hand for Beneficiaries



The Beneficiary Companion Program is there to help with paperwork and other time-consuming details, providing relief from the confusion and frustration of managing a loved one's final affairs.

### Key Services

- ♦ Guidance on how to obtain death certificate copies for final notifications
- ♦ Dedicated Beneficiary Assistance Coordinators to manage notifications and close loved one's accounts, including:

**Social Security Administration**

**Credit reporting agencies**

**Credit card companies/financial institutions**

**Third-party vendors**

**Government agencies**

- ♦ Assistance protecting the loved one's identity and full resolution services in case the deceased's identity is stolen

### Who's Eligible?

Beneficiary Companion (provided by Europ Assistance) is available to individuals covered by Symetra Group Life and/or Disability Income Insurance policies.

**For more information and plan design requirements, contact your Symetra representative.**

### Accessing Services



Beneficiaries can call the Symetra dedicated toll free number at **1-877-823-5807** for 24/7 support.

# Additional Benefits

Symetra Life Insurance Company



Beneficiary Companion Program

## A helping hand after a loss



### Your Beneficiary Companion Program

Call anytime from anywhere. We're available 24/7 to assist you.

U.S. and Canada:  
**1-877-823-5807**

Anywhere else  
(collect or direct):  
**(240) 330-1422**

Managing a loved one's final affairs can be overwhelming. The amount of time and effort needed to close an estate can make an already stressful time even more difficult.

Your Beneficiary Companion Program can offer some relief and provide guidance to help with paperwork, notifications and other time-consuming details.

#### Guidance Services

Dedicated Beneficiary Assistance coordinators are available 24/7 to:

- **Answer any questions**
- **Offer guidance on obtaining death certificate copies**
- **Manage notifications, including:**
  - Social Security Administration
  - Credit reporting agencies
  - Credit card companies/financial institutions
  - Third-party vendors
  - Government agencies
- **Discontinue access to loved one's social media accounts, and assist with memorialization to preserve their digital profile.**

#### Fraud Resolution

A deceased's identity is an attractive target for criminals—and may be relatively easy to obtain. Beneficiary Assistance coordinators will help protect your loved one's identity and lend a hand if their identity is stolen.

Services include:

- **A credit report review with the beneficiary**
- **Suppression of the deceased's credit report or an offer to freeze/close the account with credit bureaus**
- **Full-service resolution assistance if the deceased's identity is stolen:**
  - Credit bureau and fraud department notification
  - Help filing a police report
  - Creditor follow-ups

**Call 1-877-823-5807 for your Beneficiary Companion Guidebook—a handy tool to help you after a loved one's death.**

# Additional Benefits

## Health Care Navigation



Employees generally find themselves on their own when it comes to dealing with their medical plan. They're eager to find resources that can reassure them they are making the best decisions—a partner who can help navigate through their medical plan benefits.

### Administrative Support

- Easy-to-understand explanation of benefits—help identifying what's covered and what's not
- Step-by-step guidance on medical claims and billing issues
- Cost estimation for covered and/or non-covered treatment options
- Fee and payment plan negotiation
- Referral to financial resources for the underinsured and uninsured
- Explanation of the appeals process

### Clinical Support

- One-on-one reviews of employee health concerns
- Straightforward, easy-to-understand answers regarding specific diagnosis and treatment options
- Support and preparation for upcoming doctor's visits, lab work, tests and surgeries
- Coordination with appropriate health care plan provider(s)
- Referral to community resources and applicable support groups

**Administrative and clinical specialists may also refer employees to Disability Guidance<sup>®</sup> EAP services and other work/life resources.**

### Who's Eligible?

HealthChampion<sup>SM</sup> (provided by ComPsych) is available for employees on a covered short- or long-term disability leave.

For more information on buy-up programs including options that offer HealthChampion to all employees, regardless of disability claim status, contact your Symetra representative.

### Accessing Services



Claimants can call **1-866-263-4365** to access the health care navigation program 24 hours a day, seven days a week.

# Additional Benefits

Symetra Life Insurance Company



Identity Theft Protection Program

Direct access to 24/7 support  
if your identity is stolen



## Your Identity Theft Protection Program

Call anytime from anywhere.  
We're available 24/7 to  
assist you.

U.S. and Canada:  
**1-877-823-5807**

Anywhere else  
(collect or direct):  
**(240) 330-1422**

Identity theft is a rising concern and it can happen to anyone. That's where your Identity Theft Protection Program comes in.

It provides you with information to protect yourself, and step-by-step coaching to help you confirm and resolve identity theft.

### If you think your identity has been stolen

Just pick up the phone—24 hours a day, seven days a week—and call **1-877-823-5807** if you're in the U.S. or Canada, or **(240) 330-1422** from anywhere else in the world.

A Symetra Identity Theft Expert will help you obtain a copy of your credit report from all three major credit-reporting agencies. All three agencies will also place a fraud alert on your records.

Once you receive your reports, your Identity Theft Expert will walk you through the documents to help determine if fraud or theft has occurred.

### Here's the help you'll receive

- Lost wallet assistance<sup>1</sup>
- Credit information review<sup>2</sup>
- Three-bureau fraud alert placement assistance
- ID theft affidavit assistance
- Emergency cash while traveling (a repayment guarantee is needed)

### Tips to remember

- Carry only one or two credit cards.
- Bring only the ID information that you'll actually need.
- Do not carry your Social Security card in your wallet.
- If your purse or wallet is stolen, immediately report it to the police.
- Notify your financial institution if your credit card is lost or stolen.

[Continued >](#)

# Additional Benefits

## Who's eligible?

Once enrolled in a Symetra group insurance plan, you, your spouse and your dependents up to age 26 (regardless of student status) are eligible for all services provided by the Identity Theft Protection Program.

Identity thefts discovered prior to enrollment in a Symetra group insurance plan are not eligible for services.

## Don't wait until theft occurs

There's no better time to deal with identity theft than before it happens. Be sure to call 1-877-823-5807 and mention you're calling about the Symetra Identity Theft program to get your Identity Theft Protection Kit. It covers the ins and outs of identity theft and provides advice on how to avoid it. And just in case your identity is stolen, the kit includes forms you'll need to help resolve the problem.



Symetra Life Insurance Company  
777 108th Avenue NE, Suite 1200  
Bellevue, WA 98004-5135  
[www.symetra.com](http://www.symetra.com)

Symetra® is a registered service mark of Symetra Life Insurance Company.

Group insurance policies are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.

There is no guarantee that intervention on behalf of covered members will result in a particular outcome or that efforts on their behalf will lead to a result satisfactory to them. Services do not include, and covered members will not be assisted with, thefts involving non-U.S. bank accounts.

Identity Theft Protection is provided by Generali Global Assistance. Benefits may not be available in all states. Generali Global Assistance is not affiliated with Symetra Life Insurance Company or any of its affiliates. For more information, visit [us.generaliglobalassistance.com](http://us.generaliglobalassistance.com).



<sup>1</sup> Generali Global Assistance will assist you with canceling lost credit cards and provide information to help you replace lost items such as your driver's license and Social Security card.

<sup>2</sup> Member must provide a copy of their credit report, which can be obtained free of charge at [www.annualcreditreport.com](http://www.annualcreditreport.com) (once every 12 months).

# Additional Benefits

Symetra Life Insurance Company



Travel Assistance Program

## 24-hour-a-day emergency help



### Your Travel Assistance Program

Call anytime from anywhere. We're available 24/7 to assist you.

U.S. and Canada:  
**1-877-823-5807**

Anywhere else  
(collect or direct):  
**(240) 330-1422**

Emergencies happen. When they happen far from home, it's comforting to know there's a team of multilingual professionals standing by to help.

Your Travel Assistance Program offers a variety of 24-hour-a-day services in more than 200 countries and territories worldwide—and each one is just a phone call away.

#### Medical Services

- Assistance finding physicians, dentists and medical facilities.
- Monitoring during a medical emergency to determine if care is appropriate or if evacuation is required.
- When medically necessary, free transportation<sup>1,2</sup> under medical supervision to a hospital/treatment facility or to your place of residence for treatment.
- Arrangement for your traveling companion's return home if previously made arrangements must change due to your medical emergency.
- When medically necessary, free transportation<sup>1,2</sup> home for dependent children under the age of 26 who were traveling with you and are left unattended because of your hospitalization. A qualified escort will be arranged if necessary.
- Free round-trip transportation<sup>2</sup>—we arrange and pay for the most direct round-trip economy flight—for one immediate family member or friend to visit you if you're traveling alone and are likely to be hospitalized for seven consecutive days.
- Replacement of medication and eyeglasses.<sup>3</sup>
- In the event of death while traveling, all necessary government authorizations and a container appropriate for transportation will be arranged and paid for, as well as return home of the remains for burial.

#### Other Key Services

- Pre-trip information, including visa, passport, inoculation and immunization requirements; cultural information; embassy and consulate referrals; foreign exchange rates; and travel advisories.
- Emergency message relay to and from friends, relatives and business associates.
- If requested, new travel arrangements or change of airline, hotel and car rental reservations.
- An advance of up to \$500 in emergency cash after satisfactory guarantee of reimbursement from you. You are responsible for any fees associated with the transfer or delivery of funds.
- Help locating and replacing lost or stolen luggage, documents and personal possessions.
- Help locating an attorney and advancement of bail bond, where permitted by law, after satisfactory guarantee of reimbursement from you. You are responsible for attorneys fees.
- Assistance with telephone interpretation in all major languages, or referral to an interpretation or translation service for written documents.

# Additional Benefits

## Who's eligible?

You, your spouse or domestic partner, and your dependents under the age of 26 are eligible for all services provided by the Travel Assistance Program.

## You can receive pre-trip information at any time

All other services take effect when you're on a trip 100 miles or more from home lasting 90 days or less.

### When you call, please provide the following:

- 1 The address where you are staying
- 2 A phone number where we may reach you
- 3 Your employer's name

Group insurance policies are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.

Europ Assistance (EA) will not evacuate or repatriate you if an EA-designated physician determines that such transport is not medically advisable or necessary or if the injury or illness can be treated locally.

EA provides the services in all countries. However, EA may determine that services cannot be provided in certain countries or locales because of situations such as war, natural disaster or political instability. EA will attempt to assist you consistent with the limitations presented by the prevailing situation in the area. EA cannot be held responsible for failure to provide, or for delay in providing, services when such failure or delay is caused by conditions beyond its control, including but not limited to flight conditions, labor disturbance and strike, rebellion, riot, civil commotion, war or uprising, nuclear accidents, natural disaster, acts of God, or where rendering service is prohibited by local law or regulations.

Travel Assistance is provided by Europ Assistance. Benefits may not be available in all states. Europ Assistance is not affiliated with Symetra Life Insurance Company or any of its affiliates. For more information, visit [www.europassistance-usa.com](http://www.europassistance-usa.com).



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<sup>1</sup> Our medical team or one of our doctors will make the determination that transport is needed.

<sup>2</sup> Travel arrangements must be made through Europ Assistance.

<sup>3</sup> Provided service, ancillary expenses are the member's responsibility.

# Additional Benefits

## Will Preparation

A will is one of the most important legal documents you can have. It ensures that you'll control who gets your property, who will be your children's guardian, and who manages your estate when you die.

*EstateGuidance*<sup>®</sup> makes it easy to create a simple, customized, legally binding will by offering:

- Convenient online access to will documentation tools
- Simple-to-follow instructions guiding you through the will generation process
- Online support from licensed attorneys, if needed
- The ability to make revisions at no cost

You can create a simple will for \$14.99; printing and mailing services are available for an additional fee. Prices may be subject to change—contact ComPsych for additional information.

To get started:

1. Visit [www.estateguidance.com](http://www.estateguidance.com)
2. Enter your promotional code: SYMETRA
3. Choose any of the options in the drop-down menu.

## Long-Term Care

A good long-term care insurance policy delivers broad and flexible benefits to help provide and pay for the long-term care services you need when help is required. For a personal review of long-term care insurance options for you and/or your family members contact:

Debra Rauser, RN & Partner, Specializing in Long Term Care Solutions

ACSIA Partners, LLC

Bus. (650) 306-0240

Email: [darauser@acsiapartners.com](mailto:darauser@acsiapartners.com)

Website: [www.debrarauser.acsiapartners.com](http://www.debrarauser.acsiapartners.com)

CA Lic. # OD26971

# Additional Benefits

## UNUM Voluntary Whole Life

Whole life insurance is designed to pay a death benefit to your beneficiaries but it can also gain cash value while you are living. This benefit offers an affordable, guaranteed level of premium that won't increase due to age. Unlike term life insurance, this coverage can continue into retirement.

### Features:

- Ability to purchase for yourself, spouse, and children
- No physical exams are required to apply for coverage
- Coverage is portable – you can take your policy with you if you leave Pacific
- Rates won't increase and benefits will never be reduced
- Guaranteed cash value interest rate of 4.5%

### Guaranteed Issue:

No medical questions for the following levels of coverage

- Employee – up to \$70,000 for ages 15 – 80; purchased in \$10,000 increments
- Spouse – up to \$30,000 for ages 15 – 80; purchased in \$10,000 increments

A UNUM representative can assist you in calculating the cost of the benefit. Premiums will vary depending upon age, amount of coverage, and other such factors.

All Unum products are administered directly through Unum. Unum representatives can be reached at 800.635.5597 to enroll or make changes. Benefit enrollments are only accepted during annual open enrollment. Cancellations are accepted anytime.

# Additional Benefits

## **Symetra Accident Group Policy**

Accident insurance can pay lump-sum benefits based on the injury you suffered and the treatment you need, including emergency-room care and related surgery. The benefit can help offset the out-of-pocket expenses that medical insurance does not pay, including deductibles and copays.

### Covered injuries and accident related expenses include:

- Hospitalization and Surgeries
- Follow-up Care
- Common Injuries

Benefits are paid for accidents that occur off the job.

You can enroll in the Accident Group Policy through your Benefit Focus Portal during Open Enrollment or at time of Hire. Please note: if you were enrolled in the Accident Plan in 2020 you will need to reenroll for 2021.

# Benefit Resource Center

The Benefit Resource Center is a great resource to utilize when seeking advice on insurance plans, help with claims, and any other detail questions you may have in regards to benefits.



Call the Benefit Resource Center ("BRC"),  
We're Here To Help!

We speak insurance. Our Benefits Specialists can help you with:

- Deciding which plan is the best for you
- Benefit plan & policy questions
- Eligibility & claim problems with carriers
- Information about claim appeals & process
- Allowable family status election changes
- Transition of care when changing carriers
- Claim escalation, appeal & resolution
- Medicare basics with your employer plan
- Coordination of benefits
- Finding in-network providers
- Access to care issues
- Obtaining case management services
- Group disability claims
- Filing claims for out-of-network services



## Benefit Resource Center

BRCCA@usi.com | Toll Free: 888-336-7463  
Monday through Friday 8:00am to 5:00pm Pacific Standard Time

# Benefit Resource Center

El Centro de Recursos de Beneficios es un gran recurso para utilizar cuando busque asesoramiento sobre planes de seguro, ayuda con reclamos y cualquier otra pregunta detallada que pueda tener con respecto a los beneficios.



Llame al Centro de Recursos de Beneficios ("BRC"), ¡Estamos Aquí Para Ayudarlo!

Hablamos sobre seguros.

Nuestros especialistas en beneficios pueden ayudarlo con:

- Decisiones respecto a qué plan es el mejor para usted
- Preguntas sobre pólizas y planes de beneficios
- Problemas de elegibilidad y reclamos con las aseguradoras
- Información sobre procesos y apelaciones de reclamos
- Cambios permitidos en las elecciones de estado familiar
- Transición de la atención al cambiar de aseguradora
- Intensificación, apelación y resolución de reclamos
- Conceptos básicos de Medicare con el plan de su empleador
- Coordinación de beneficios
- Búsqueda de proveedores dentro de la red
- Acceso a cuestiones de atención
- Obtención de servicios de manejo de casos
- Reclamos colectivos por discapacidad
- Presentación de reclamos por servicios fuera de la red



**Centro de Recursos de Beneficios**

BRCCA@usi.com | Línea gratuita: 888-336-7463

Lunes a Viernes de 8am a 5pm hora del PST

# USI Mobile App

## Benefits Information When You Need It

University of the Pacific

### FIND IT IN THE APP STORE

Search for 'usieb' and download our free app.

Enter this code when prompted: **250768**

### HIGHLIGHTS OF THE usieb APP

- Access benefits information on the go
- Convenient contact information for Carriers and HR
- Organized plan information in one place
- View the most updated plan information
- Store your ID cards in the app



### usieb: FREE MOBILE BENEFITS APP FOR ANDROID AND IPHONE

**The usieb app gives you on-the-go access to your benefit and insurance policy details, HR contact information and more!**

The app is a quick and simple way for you and your enrolled dependents to access benefit summaries and other important information about our group plans. Store photos of ID cards in the app and easily locate carrier and HR contact information—all in one place. The usieb app is free for iPhone and Android.

#### Getting In Touch

The app provides employees and their enrolled dependents single-point contact information for benefits resources and insurance carriers.

#### Keeping Up-to-Date

The app automatically connects you with the most updated plan information and allows for message reminders from your employer.

#### Lightening Wallets

The app allows you to store images of your ID cards, freeing up space and giving you access when you need it.

#### Staying Organized

The app gives you access to benefit plan information and ID cards—all in one place.

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# USI Mobile App

## La Información de los Beneficios cuando usted la necesita

University of the Pacific

### Encuéntrela en la Tienda de Aplicaciones

Busque "usieb" y descargue nuestra aplicación gratuita.

Introduzca el código cuando se le solicita: **250768**

### LOS ASPECTOS DESTACADOS DE LA APLICACIÓN usieb

- El acceso a la información de los beneficios sobre la marcha
- La información de contacto de las compañías de seguros y de Recursos Humanos de una forma conveniente.
- La información del plan está organizada en un solo lugar.
- Vea la información del plan más actualizada.
- Guarde sus tarjetas de identificación en la aplicación.



### usieb: LA APLICACIÓN MÓVIL GRATUITA DE LOS BENEFICIOS PARA ANDROID Y IPHONE

¡La aplicación usieb le da acceso en todo momento a los detalles de sus beneficios y su póliza de seguro, la información de contacto de Recursos Humanos y más!

La aplicación es una forma rápida y sencilla para que usted y sus dependientes inscritos tengan acceso a los resúmenes de los beneficios y otra información importante sobre nuestros planes grupales. Guarde las fotos de las tarjetas de identificación en la aplicación y encuentre fácilmente la información de contacto de la compañía de seguros y Recursos Humanos – todo en un solo lugar. La aplicación usieb es gratuita para iPhone y Android

#### Ponerse en Contacto

La aplicación les provee a los empleados y a sus dependientes inscritos la información de contacto de un punto único para los recursos de los beneficios y las compañías de seguros.

#### Mantenerse Actualizado

La aplicación lo conecta automáticamente con la información más actualizada del plan y permite los mensajes de avisos de su empleador.

#### Las Carteras Se Aligeran

La aplicación le permite guardar las imágenes de sus tarjetas de identificación, liberando espacio y dándole acceso cuando lo necesita.

#### Permanecer Organizado

La aplicación le da acceso a la información del plan de beneficios y las tarjetas de identificación – todo en un solo lugar.

\* Para que la información se muestre en español en su teléfono, por favor configure el idioma del teléfono en español en su configuración general

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# Contact Information

Benefit	Phone	Website
<b>Medical</b>		
Pacific Plans – EPO and HDHP	888.212.1231	<a href="http://www.deltahealsystems.com">www.deltahealsystems.com</a>
HSA Bank	800.357.6246	<a href="http://www.hsabank.com">www.hsabank.com</a>
Kaiser Permanente HMO and HDHP	800.464.4000	<a href="http://www.kp.org">www.kp.org</a>
Kaiser Chiropractic Services through ASH	800.678.9133	<a href="http://www.ashlink.com/ash/kp">www.ashlink.com/ash/kp</a>
Kaiser Health Savings Account	877.761.3399	<a href="http://www.kp.org/healthexpense">www.kp.org/healthexpense</a>
LiveHealth Online		<a href="http://www.livehealthonline.com">www.livehealthonline.com</a>
<b>Dental</b>		
Delta Dental PPO	800.765.6003	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a>
DeltaCare USA DHMO	800.422.4234	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a>
<b>Vision</b>		
Vision Service Plan Choice Network	800.877.7195	<a href="http://www.vsp.com">www.vsp.com</a>
<b>Pharmacy</b>		
WellDyne Rx	888.479.2000	<a href="http://www.members.welldynrx.com">www.members.welldynrx.com</a>
<b>Flexible Spending and Commuter Benefits</b>		
Trustmark	800.832.3332	<a href="http://www.myTrustmarkBenefits.com">www.myTrustmarkBenefits.com</a>
<b>Retirement</b>		
TIAA	800.842.2776	<a href="http://www.tiaa.org/pacific">www.tiaa.org/pacific</a>
<b>Life and AD&amp;D</b>		
Symetra	877.377.6773	<a href="http://www.symetra.com">www.symetra.com</a>
<b>Disability</b>		
Short Term – State of California	800.480.3287	<a href="http://www.edd.ca.gov/disability/SDI_Online.htm">www.edd.ca.gov/disability/SDI_Online.htm</a>
Long Term – Symetra	877.377.6773	<a href="http://www.symetra.com">www.symetra.com</a>
<b>Additional Benefits</b>		
California Casualty – Auto/Home Insurance	877.654.9316	<a href="http://www.calcas.com/arajczyk">www.calcas.com/arajczyk</a>
Employee Assistance	888.327.9573	<a href="http://www.guidanceresources.com">www.guidanceresources.com</a>
Long Term Care	650.306.0240	<a href="http://www.debrarauser.ltcfp.com">www.debrarauser.ltcfp.com</a>
UNUM Whole Life	800.275.8686	<a href="http://www.unum.com">www.unum.com</a>
Symetra Group Accident Policy	800.497.3699	<a href="http://www.symetra.com">www.symetra.com</a>
<b>Human Resources</b>		
Sacramento	916.739.7031	<a href="http://Pulse.pacific.edu/hr">Pulse.pacific.edu/hr</a>
San Francisco	415.929.6468	<a href="http://Pulse.pacific.edu/hr">Pulse.pacific.edu/hr</a>
Stockton	209.946.2124	<a href="http://Pulse.pacific.edu/hr">Pulse.pacific.edu/hr</a>
<a href="mailto:employee_benefits@pacific.edu">employee_benefits@pacific.edu</a>		