Annual Enrollment & Resource Guide

FOR INSURANCE, RETIREMENT AND WELLNESS PROGRAMS

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

IMPORTANT: AVAILABILITY OF SUMMARY HEALTH INFORMATION

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

To review an SBC for UT SELECT PPO or Out-of-Area coverage, visit the website www.bcbstx.com/ut. You can view the glossary at www.dol.gov/ebsa/pdf/SBCUniformGlossary.pdf. To request a copy of these documents free of charge, you may call the SBC hotline at (855) 756-4448.
UT Benefits for one.
Health for UT System.

Annual Enrollment Timeline

What to Expect in the New Plan Year

SEPTEMBER 1, 2017
• Plan changes begin.
• New UT SELECT Medical ID cards for everyone enrolled.
• New ID cards for any plans you changed during Annual Enrollment.
• Deductibles and limits start over.

ONGOING: KEEP IN TOUCH
YOUR ADDRESS | Notify your institution about any changes to your contact information.
NEWSLETTER | Read the UT Office of Employee Benefits monthly newsletter. If you don’t already receive it, subscribe by entering your email address in My UT Benefits.
CONTACT INFO | Keep the Contact Information section of this newsletter to contact insurance vendors for plan information or your institution about your coverage.
### Annual Enrollment Detailed Timeline

<table>
<thead>
<tr>
<th><strong>By July 15</strong></th>
<th><strong>Review</strong>&lt;br&gt;Make Informed Benefits Choices With Resources Available to Help You</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Enrollment Website available by July 15, 2017</td>
<td></td>
</tr>
<tr>
<td>• Annual Enrollment Meetings (at your institution)</td>
<td></td>
</tr>
<tr>
<td>• Insurance vendors available for plan-specific questions (see Contacts at the end of this publication)</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.utsystem.edu/offices/employee-benefits">www.utsystem.edu/offices/employee-benefits</a></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>July 15 – 31</strong></th>
<th><strong>Make Elections Annual Enrollment Period</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>July 15 – July 31, 2017</td>
<td></td>
</tr>
<tr>
<td>UT Benefits Enrollment Options (PIN) letter or email delivered by July 15 lists current coverage, options for coverage for the next plan year beginning September 1, 2017, and instructions for making changes online.</td>
<td></td>
</tr>
<tr>
<td>During this period, you can:</td>
<td></td>
</tr>
<tr>
<td>• Make changes to your benefits,</td>
<td></td>
</tr>
<tr>
<td>• Add or remove dependents,</td>
<td></td>
</tr>
<tr>
<td>• Enroll in UT FLEX, and</td>
<td></td>
</tr>
<tr>
<td>• Change coverage options for certain plans.</td>
<td></td>
</tr>
<tr>
<td>This is a good time to update other items if you’ve had changes during the year, like:</td>
<td></td>
</tr>
<tr>
<td>• Contact information,</td>
<td></td>
</tr>
<tr>
<td>• Tobacco user status, and</td>
<td></td>
</tr>
<tr>
<td>• Beneficiary information.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>By August 15</strong></th>
<th><strong>Follow Up Complete EOI or EOE (If Required)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Deadline Tuesday, August 15, 2017</td>
<td></td>
</tr>
<tr>
<td>Evidence of Insurability (EOI) is required to enroll in certain insurance coverage, including: Disability insurance and some Voluntary Group Term Life.</td>
<td></td>
</tr>
<tr>
<td>Evidence of Eligibility (EOE) is required when you enroll your spouse or a dependent in the UT Benefits program for the first time.</td>
<td></td>
</tr>
</tbody>
</table>
Out-of-Pocket Premiums for 2017-2018

There are no changes to any out-of-pocket premium rates for the 2017-2018 plan year. Age and salary-based premiums may change depending on your age and salary as of September 1, 2017.

### Voluntary Group Term Life Rates
Please be sure to review the rate associated with your age as of September 1, 2017.

#### Employee Rate Chart

<table>
<thead>
<tr>
<th>PLAN</th>
<th>EMPLOYEE</th>
<th>EMPLOYEE &amp; SPOUSE</th>
<th>EMPLOYEE &amp; CHILD(REN)</th>
<th>EMPLOYEE &amp; FAMILY</th>
</tr>
</thead>
<tbody>
<tr>
<td>UT SELECT Medical</td>
<td>$0</td>
<td>$257.53 no change</td>
<td>$269.34 no change</td>
<td>$507.15 no change</td>
</tr>
<tr>
<td>FULL-TIME</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UT SELECT Medical</td>
<td>$299.07</td>
<td>$713.37 no change</td>
<td>$668.72 no change</td>
<td>$1,064.24 no change</td>
</tr>
<tr>
<td>PART-TIME</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UT SELECT Dental</td>
<td>$32.40 no change</td>
<td>$61.51 no change</td>
<td>$67.80 no change</td>
<td>$96.40 no change</td>
</tr>
<tr>
<td>UT SELECT Dental Plus</td>
<td>$59.03 no change</td>
<td>$112.11 no change</td>
<td>$123.70 no change</td>
<td>$176.24 no change</td>
</tr>
<tr>
<td>DeltaCare Dental</td>
<td>$8.89 no change</td>
<td>$16.90 no change</td>
<td>$18.68 no change</td>
<td>$26.67 no change</td>
</tr>
<tr>
<td>HMO</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superior Vision</td>
<td>$5.90 no change</td>
<td>$9.30 no change</td>
<td>$9.52 no change</td>
<td>$15.10 no change</td>
</tr>
<tr>
<td>Superior Vision Plus</td>
<td>$9.00 no change</td>
<td>$14.08 no change</td>
<td>$15.08 no change</td>
<td>$21.30 no change</td>
</tr>
<tr>
<td>Tobacco Premium</td>
<td>$0 to $90 per month based upon tobacco user status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Employee spouse rates available in [My UT Benefits](#).

### Voluntary Accidental Death & Dismemberment

**MONTHLY PREMIUM RATE**

- $0.14 per $10,000 coverage

### Short-Term and Long-Term Disability

**MONTHLY PREMIUM RATES**

- Short Term Disability: $0.28 per $100 of monthly income
- Long Term Disability: $0.38 per $100 of monthly income

Basic Coverage package includes medical, prescription, $40K Basic Life, and $40K Basic AD&D for employees.
UT SELECT Medical Plan Changes for 2017-2018

Great news! There are no changes to your out-of-pocket premiums for the UT SELECT Medical plan for 2017-2018! And for the UT SELECT Medical plan (including prescription), the benefits structure is staying the same. There will be a new benefit option known as the UT Health Network (described below) that will give you access to enhanced benefits when services are provided by certain UT physicians or at certain UT-owned facilities.

The annual deductible for UT SELECT remains at $350 for individuals and $1,050 for families. The deductible is the amount you pay out-of-pocket for certain services (outpatient and inpatient procedures and services, for example) before the medical plan starts to pay. Once the deductible is met, the plan pays a portion of the costs and you pay a portion called coinsurance. In-network coinsurance is 20% of allowed charges. For the 2017-2018 plan year, the UT SELECT Medical plan coinsurance out-of-pocket maximum remains $2,150 for individuals and $6,450 for families. This means that you will not pay above that amount in coinsurance for allowed charges.

In accordance with guidelines set by the Affordable Care Act, total out-of-pocket limits for in-network member cost share (which includes medical and prescription drug costs) are increasing to $7,150 for the individual (an increase of $300), and $14,300 for families (an increase of $600). These limits provide an extra level of financial protection for you.

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

NEW! UT HEALTH NETWORK

A new benefit tier known as the UT Health Network offers an enhanced plan design for UT SELECT Medical participants receiving services from certain UT physicians and certain UT medical facilities. You will pay lower copays and coinsurance when seeing a participating UT physician at a participating UT-owned facility, and you can also save on physician charges when treatment is received from a participating UT physician at a non UT-owned facility. Benefits of the new UT Health Network along with several claims examples are illustrated below.

<table>
<thead>
<tr>
<th>NEW! UT HEALTH NETWORK BENEFIT</th>
<th>CURRENT UT SELECT BENEFIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIMARY CARE</td>
<td></td>
</tr>
<tr>
<td>SPECIALIST</td>
<td>$25 copay</td>
</tr>
<tr>
<td>EMPLOYEE CLINIC*</td>
<td>$10 copay</td>
</tr>
<tr>
<td>DEDUCTIBLE</td>
<td>$350</td>
</tr>
<tr>
<td>COINSURANCE</td>
<td>10%</td>
</tr>
<tr>
<td>INPATIENT COPAY*</td>
<td>$0 / day</td>
</tr>
</tbody>
</table>

*UT-owned hospitals participating in the UT Health Network include UT Medical Branch Galveston and UT Health Northeast (Tyler). Check with your institution’s Employee or Nursing Clinics to verify their participation in the UT Health Network.

UT Health Houston, UT Health San Antonio, and UT Austin Dell Medical School do not own their own hospitals, but the UT Health Network benefit is available for their physician services and UT-owned clinics.

The UT Health Network benefit is not available for services received from UT Rio Grande Valley, UT Southwestern, or UT MD Anderson Cancer Center physicians or facilities. Your regular UT SELECT Medical in-network benefits apply for these providers and locations.

BENEFITS EXAMPLES

Your UT Health Network benefit applies depending on the status of the provider and facility as shown below.

1) Visit to a Participating Employee Clinic
   Member pays $10 copay.

2) Office Visit with a UT Provider at a UT-owned or non UT-owned Facility
   Member pays office visit copay of $20 or $25.

3) Inpatient or Outpatient Services with a UT Provider at a UT-owned Facility
   Member pays regular $350 deductible, 10% coinsurance on provider and facility charges, and a $0 inpatient/$100 outpatient copay.

4) Inpatient or Outpatient Services with a UT Provider at a non UT-owned Facility
   Member pays regular $350 deductible, 10% coinsurance on provider charges, 20% coinsurance on facility charges, and $100 facility copay per day.
INPATIENT & OUTPATIENT SERVICES
Benefits and claims for services provided by Emergency Room physicians, anesthesiologists, radiologists, and pathologists will be based on the network status of the provider. Ask your providers if they are in the BCBS network to ensure network benefits will apply.

PRESCRIPTION DRUG PLAN
The UT SELECT Prescription Drug plan is included in the UT SELECT Basic Coverage package. There are occasional updates to the formulary for the UT SELECT Prescription Drug plan. Even though the plan benefits are not changing, you could see changes in your medication costs, generally after January 1 of each year.

Vision Benefits

VISION PLAN OPTIONS
There are no changes to the plan design or premium this year for the vision plans. You and your eligible dependents have the option to enroll in the basic plan or the enhanced “Plus” plan, both administered by Superior Vision. While both plans cover most of the same types of services, the Vision Plus plan includes some additional benefit at a slightly higher premium. Compare the benefits carefully to help you select the most appropriate plan for you and your family.

VISION PLAN DESIGN FEATURES 2017-2018

<table>
<thead>
<tr>
<th>PLAN DESIGN FEATURES</th>
<th>SUPERIOR VISION PLAN</th>
<th>SUPERIOR VISION PLUS PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Exam Copayment</td>
<td>$35 COPAY</td>
<td>$35 COPAY</td>
</tr>
<tr>
<td>Frame Allowance</td>
<td>$140</td>
<td>$150</td>
</tr>
<tr>
<td>Progressive Lens Allowance</td>
<td>Member pays difference between retail cost of lined trifocals and progressive lenses.</td>
<td>$120</td>
</tr>
</tbody>
</table>
| Covered Lens Options      | Standard lens options covered in full; additional options not covered | Standard lenses and additional lens options covered in full:  
  • Polycarbonates (dependent children to age 26)  
  • Scratch coating  
  • Ultraviolet coating |
| Network of Providers      | Best value provided when visiting a contracted Superior Vision provider. Please contact Superior Vision customer service before you receive services to confirm whether your provider is in-network. | |

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

DENTAL PPO PLAN OPTIONS
UT System will continue to offer two self-funded UT SELECT Dental PPO plan options: UT SELECT Dental and UT SELECT Dental Plus, both administered by Delta Dental Insurance Company. There are no premium changes for either plan. As self-funded plans, all claims are paid by UT System through premiums collected from participants.

Both plans offer the freedom to choose any licensed dentist. For maximum savings, choose a provider from the Dental Preferred Organization (DPO). If you choose a provider outside of the DPO network, you may be subject to balance billing. Contact Delta Dental customer service to confirm the status of your dental provider.

While both plans cover most of the same types of services, the premiums are different and the benefits the UT SELECT Dental Plus plan has enhanced benefits. Compare the benefits carefully to help you select the most appropriate plan for you and your family.

<table>
<thead>
<tr>
<th>PLAN DESIGN FEATURES</th>
<th>UT SELECT DENTAL PPO</th>
<th>UT SELECT DENTAL PLUS PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$25</td>
<td>Plan pays deductible.</td>
</tr>
<tr>
<td>Annual Benefit Allowance</td>
<td>$1,250</td>
<td>$3,000</td>
</tr>
<tr>
<td>Orthodontics</td>
<td>Separate $1,250 lifetime maximum.</td>
<td>Separate $3,000 lifetime maximum.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BENEFITS AND COVERED SERVICES</th>
<th>UT SELECT DENTAL PPO</th>
<th>UT SELECT DENTAL PLUS PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic &amp; Preventive Services</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Basic Services</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>Major Services</td>
<td>50%</td>
<td>80%</td>
</tr>
<tr>
<td>Orthodontic Services</td>
<td>50%</td>
<td>80%</td>
</tr>
</tbody>
</table>

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

DENTAL HMO OPTION
There are no premium changes and the benefits will remain the same for the 2017-2018 plan year for the DeltaCare USA Dental Health Maintenance Organization (DHMO). When you receive a dental service, you pay a fixed dollar amount for the treatment (a “copayment”). The DeltaCare USA plan has set copayments and no annual deductibles or maximums for covered benefits. Diagnostic and preventive services have a low or sometimes no copayment. However, generally if you visit a dentist outside of the network, you may be responsible for the entire bill.

This plan does require you to choose one dentist or dental facility to coordinate all of your oral health needs. If you need to see a specialist, your primary care dentist will refer you; specialty care requires preauthorization. Upon enrollment into the DeltaCare USA plan, you must select a new dentist in My UT Benefits during Annual Enrollment or one will be selected for you based on your address.

You may call Delta Dental at (800) 893-3582 to find out if your current dentist is in the DeltaCare network. Do not make any appointments until you are certain that DeltaCare has confirmed a dentist for you and/or for each of your covered dependents. If you visit a dentist other than the one listed as your primary dental provider, your services may not be covered.

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

Group Term Life (GTL) insurance from Dearborn National can help ensure financial security for your family and loved ones upon your death. There are no changes to Employee GTL for 2017-2018. Benefits for GTL include:

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

Accidental Death and Dismemberment (AD&D) insurance provides additional protection with no EOI requirements. There are no changes to Employee AD&D for 2017-2018. Benefits for AD&D include:

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

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

Short-term and Long-term Disability

Statistics show as many as three out of ten people will suffer a disabling illness or injury during their career that would keep them out of work for three months or more. Disability insurance replaces a portion of your income if you suffer a prolonged illness or non-work related injury that prevents you from doing your job. Dearborn National provides Short-term Disability (STD) and Long-term Disability (LTD) insurance benefits for active UT System employees. This benefit is not available for dependents and does not provide benefits for you to take time off to care for an ill or injured family member.

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

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

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

<table>
<thead>
<tr>
<th>AGE AT DISABILITY</th>
<th>MAXIMUM PERIOD PAYABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than age 60</td>
<td>To age 65, but not less than 5 years</td>
</tr>
<tr>
<td>Age 60 through 64</td>
<td>5 years</td>
</tr>
<tr>
<td>Age 65 through 69</td>
<td>To age 70, but not less than 1 year</td>
</tr>
<tr>
<td>Age 70 and over</td>
<td>1 year</td>
</tr>
</tbody>
</table>

**DISABILITY INSURANCE MONTHLY PREMIUM RATES**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-term Disability</td>
<td>$0.28 per $100 of monthly income</td>
</tr>
<tr>
<td>Long-term Disability</td>
<td>$0.38 per $100 of monthly income</td>
</tr>
</tbody>
</table>
Participating in the UT FLEX flexible spending account program is convenient, easy, and best of all, saves you money! Through your UT FLEX account, you can pay for eligible health care and dependent day care expenses using pre-tax dollars, which means you don’t pay federal income or Social Security taxes on this money.

**HOW MUCH MIGHT YOU SAVE?**

<table>
<thead>
<tr>
<th></th>
<th>WITH AN FSA</th>
<th>WITHOUT AN FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ANNUAL SALARY</strong></td>
<td>$40,000</td>
<td>$40,000</td>
</tr>
<tr>
<td><strong>HEALTH CARE FSA CONTRIBUTION (PRE-TAX)</strong></td>
<td>($1,500)</td>
<td>($0)</td>
</tr>
<tr>
<td><strong>DEPENDENT CARE FSA CONTRIBUTION (PRE-TAX)</strong></td>
<td>($4,000)</td>
<td>($0)</td>
</tr>
<tr>
<td><strong>TAXABLE INCOME AFTER CONTRIBUTION AMOUNT</strong></td>
<td>$34,500</td>
<td>$40,000</td>
</tr>
<tr>
<td><strong>ESTIMATED TAXES WITHHELD (22.65%)</strong></td>
<td>($7,814)</td>
<td>($9,060)</td>
</tr>
<tr>
<td><strong>POST-TAX INCOME</strong></td>
<td>$26,686</td>
<td>$30,940</td>
</tr>
<tr>
<td><strong>MONEY SPENT AFTER TAXES ON HEALTH CARE AND DEPENDENT DAY CARE EXPENSES</strong></td>
<td>$(0)</td>
<td>$(5,452)</td>
</tr>
<tr>
<td><strong>TAKE HOME PAY</strong></td>
<td>$26,686</td>
<td>$25,464</td>
</tr>
<tr>
<td><strong>SAVINGS</strong></td>
<td>$1,222</td>
<td>$0</td>
</tr>
</tbody>
</table>

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

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

**UT FLEX HEALTH CARE REIMBURSEMENT ACCOUNT (HCRA)**

*Important:* In response to the Internal Revenue Service (IRS) increasing the annual maximum election, effective plan year 2017-2018 (September 1, 2017) the new annual maximum election per employee for HCRA accounts is $2,600 (an increase of $50).

With a UT FLEX HCRA, you can set aside up to $2,600 per plan year in pre-tax dollars to pay for eligible health care expenses, including these common expenses:

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

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

**UT FLEX DEPENDENT DAY CARE REIMBURSEMENT ACCOUNT (DCRA)**

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

- Before or after school care;
- Preschool or nursery school; and
- Summer day camp.

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

**IMPORTANT REMINDER**

Don’t forget – to participate in UT FLEX for 2017-2018, you **must** make your election through the My UT Benefits online enrollment system during this year’s Annual Enrollment period – even if you are a current UT FLEX participant.
NO ADMINISTRATIVE FEES FOR PARTICIPATION OR DEBIT CARD

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

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

- Improving your cash flow throughout the plan year by allowing you to directly access your account for eligible expenses rather than paying out of pocket and filing for reimbursement. You have direct access to your entire annual election amount beginning on the first day of the plan year (9/1/2017);
- Eliminating the need for you to complete claim forms or any other paperwork for most expenses;* and,
- Ensuring that eligible purchases are automatically deducted from your available UT FLEX HCRA balance so you always know how much you have remaining in your account.

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

Important: If you currently have a UT FLEX Debit Card, do NOT discard it. As long as you make a UT FLEX HCRA election for 2017-2018, your Debit Card will continue to work. Expiring cards will be replaced as necessary, similar to most credit and debit cards.

NEED HELP DETERMINING HOW MUCH TO ELECT?

Use the savings calculator online at www.MyUTFLEX.com to help you estimate your eligible expenses by itemizing your unreimbursed health and dependent day care costs. To use the calculator on the UT FLEX website, click on the Savings Calculator tab and enter your annual estimated costs in each category. Once complete, you’ll have an estimate for an annual election and you can also see your estimated tax savings!

PHYSICIAN EXERCISE REFERRAL

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

Dependent Eligibility and Documentation

NEW! The latest Texas legislative session resulted in some updates to the statute that governs the UT group insurance plan. One change that could affect you and your dependents is a change in child eligibility for optional insurance coverage which is everything except the UT SELECT Medical plan with prescription drug coverage. Previously, unmarried dependent children were only allowed to stay enrolled in the optional coverage up to the age of 25 but could stay on the medical plan regardless of marital status up to the age of 26, unless they were determined to be incapacitated. Effective September 1, 2017, dependent children may stay on all of the UT group insurance plans until age 26 regardless of marital status.

TAKE ACTION if you want to add a dependent back to coverage who “aged out” or was dropped from optional coverage because they turned 25, but will not turn 26 before September 1, 2017.

ELIGIBILITY

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

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

IF YOU CURRENTLY COVER A DEPENDENT who is also receiving premium sharing for coverage through a plan with Texas A&M or Employees Retirement System of Texas, please choose to have that person covered under only one plan and make the appropriate enrollment changes at this time.
IMPORTANT NOTICE
Misrepresentation of dependent eligibility constitutes a policy violation that could result in consequences ranging from a reprimand to dismissal. Misrepresentation may also require that you reimburse benefits paid on behalf of an ineligible individual. Deliberate misrepresentation may constitute criminal fraud and could result in a referral to law enforcement.

SURVIVING DEPENDENTS
When an employee passes away, the surviving spouse and dependent children may be eligible to continue certain UT Benefits coverage. If the employee has at least five years of TRS or ORP service credit, including at least three years as a benefits-eligible employee with UT System, the surviving spouse may continue medical, dental, and vision coverage in which they were enrolled at the time of the employee’s death. Continuation is allowed for the remainder of the surviving spouse’s life unless coverage is term for non-payment of premium. Similarly, surviving dependent children of an employee who meets the above service requirements may continue coverage until they no longer meet the age requirements for dependent coverage. The surviving spouse and dependent children of an employee who does not meet the above service requirements at the time of death may elect COBRA to continue their medical, dental, and vision coverage for a period of up to 36 months.

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

UT Retirement: Annual Enrollment and Your Retirement Savings Opportunities

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

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

While you can enroll in or increase your contribution in the UTSaver TSA or UTSaver DCP at any time, annual enrollment is a great time to think about your total future retirement needs. Contributions can be as little as $15 per month or as much as $18,000.00 a year. In some cases, you may even be able to contribute more. All contributions are conveniently deducted from your paycheck before taxes, which means your taxable income decreases. If you prefer to make your contributions after taxes have been deducted, that option is available for you too.

NEED HELP INVESTING YOUR CONTRIBUTIONS?
The UT Retirement Programs partner with our providers to ensure you have the resources you need. There are dozens of financial representatives in your area who will be glad to sit down with you and help you determine your best course of action.

After making your annual enrollment elections, make sure to go back and click on the link to the UT System Retirement Programs website at www.utretirement.utsystem.edu to learn more about the TSA or DCP plans, or to read about the services each provider makes available to you at no cost. You can even schedule an appointment with a financial advisor at your convenience. Take the opportunity to ensure that your financial health is just as robust as your physical health!
The UT System Living Well program provides a variety of resources to enable employees, retirees, and dependents who participate in the UT SELECT Medical plan to take charge of their health and develop their own personal wellness program. Our mission is to improve the health and well-being of Texans through achieving optimal levels of health for University of Texas System employees, retirees and dependents at all Institutions.

**LIFESTYLE MANAGEMENT**
Weight Management and Tobacco Cessation Programs: Guidance and support with licensed wellness coaches provided by BCBSTX. Call (800) 462-3275.

**CONDITION MANAGEMENT**
These voluntary health improvement programs provided by BCBSTX can help members with congestive heart failure, coronary artery disease, chronic obstructive pulmonary disease, asthma, and diabetes. Call (800) 462-3275.

**24/7 NURSELINE**
Get answers to your health care questions, information about major medical issues, chronic illness support, and lifestyle change support. Call toll-free: (888) 315-9473, 24 hours a day, 7 days a week.

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

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

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

**ONSITE HEALTH CHECKUPS**
This checkup, similar to what you might receive at your doctor’s office, is designed to identify issues that may affect your health and help you get them under control before they become serious. Participating institutions will be communicating the dates via email and posters.

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

**ANNUAL PHYSICAL ACTIVITY CHALLENGE**
Team up with your institution for the annual Physical Activity Challenge. You’ll receive a weekly goal and can work with colleagues towards earning your institution the coveted Traveling Trophy.

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

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

**SHARE YOUR HEALTH & WELLNESS SUCCESS STORY**
Be a resource and inspiration to help others improve their health! Do you have a story to share? Tell us about it at www.surveymonkey.com/r/LivingWellSuccessStory.

**LEARN MORE**
Read about all of these programs at our Living Well website: www.livingwell.utsystem.edu.
How to Change Your Benefits

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

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

IMPORTANT! Logging in with your SSN is not an option for My UT Benefits. Employees are encouraged to login using UT EID (UT Austin) or Single Sign On (SSO). As an alternative, you may also login using your 8-character Benefits ID (BID) & PIN or Campus ID & PIN. Your BID can be found on your medical, prescription, or dental ID Cards. If needed, your institution’s HR or Benefits Office can provide your Campus ID. Both BID and Campus ID are also available once you successfully login to My UT Benefits.

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

EVIDENCE OF INSURABILITY/EVIDENCE OF ELIGIBILITY
If you make a coverage election that requires you to submit an Evidence of Insurability (EOI) application or Evidence of Eligibility (EOE) for a dependent, you must follow through by providing this information by August 15, 2017. If you do not, your requested changes will not be implemented.

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

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

BE AWARE THAT CHANGES MADE DURING AE WILL TAKE EFFECT ON SEPTEMBER 1
EXCEPTION: If EOI is required and has not been approved by September 1, changes will take effect on the approval date for Life Insurance or the first of the month following approval for Disability Insurance.

Evidence of Insurability

DEADLINE FOR SUBMISSION IS AUGUST 15

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

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

LIFE AND DISABILITY EOI
The My UT Benefits online system will automatically direct you to complete EOI electronically if you enroll online. Otherwise, you may complete a paper form and submit it to the insurer. You can view and print the life and disability EOI forms online at www.dearbornnational.com/ut/pdf/EOI_Rev2016.pdf. You can also request a form from your institution’s HR or Benefits Office.
Evidence of Eligibility
DEADLINE FOR SUBMISSION IS AUGUST 15

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

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

Keep Your ID Cards
Expect new UT SELECT Medical ID cards by September 1, 2017. Keep your current card until the new one arrives.
Keep your ID cards for other plans you did not change.
If you enroll in a new insurance plan type during Annual Enrollment or you change the plan you are currently enrolled in (such as from Vision to Vision Plus), you will receive a new insurance ID card prior to the start of the 2017-2018 plan year.

Ongoing: Keep In Touch
If your address or employment changes, it could affect your benefits. Notify your institution if you have one of these changes.

Monthly Newsletter | Read the UT Office of Employee Benefit monthly newsletter. If you don’t already receive it, subscribe by entering your email address in My UT Benefits.
Contact Us | Keep the "Contacts" section of this newsletter to contact insurance vendors for plan information or your institution about your coverage.
Changes During the Year

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

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

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

An employee

- whose dependent loses insurance coverage under the Medicaid or CHIP program as a result of loss of eligibility of either the employee or the dependent; or
- whose dependent becomes eligible for a premium assistance subsidy under Medicaid or CHIP

may enroll this dependent in the basic coverage under UT Benefits, as long as the dependent meets all other UT eligibility requirements and is enrolled within 60 days from the date of the applicable event. If enrollment of the dependent is conditioned on enrollment of the retired employee, the retired employee will also be eligible to enroll.

Nondiscrimination Notice

Discrimination is Against the Law

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

The UT System Office of Employee Benefits provides:

Free aids and services to people with disabilities to communicate effectively with us, such as:
- Qualified sign language interpreters, and
- Written information in other formats (large print, audio, accessible electronic formats, other formats).

Free language services to people whose primary language is not English, such as:
- Qualified interpreters, and
- Information written in other languages.

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

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

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

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

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

Spanish
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al UT SELECT Medical 1-866-882-2034.

Vietnamese

Chinese

Korean
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. UT SELECT Medical 1-866-882-2034.

Arabic
ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوفر لك بالمجانية. اتصل برقم UT SELECT Medicare Part D 1-800-860-7849 (TTY: 1-800-716-3231).

Urdu
خبردار: اگر آپ اردو بولیں تو آپ کو زبان کی مدد میں دستیاب ہے - کال کریں UT SELECT Prescription Drug 1-800-818-0155.

Tagalog
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa UT SELECT Medical 1-866-882-2034.

French
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le UT SELECT Medical 1-866-882-2034.

Hindi
ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मूलतः में भाषा सहायता सेवाएं उपलब्ध हैं। UT SELECT Prescription Drug 1-800-818-0155 फोन करें।

Laotian
ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວ ົ້ າພາສາ ລາວ, ການບ ໍ ລ ິ ການຊ່ວຍເຫຼື ອດ້ານພາສາ, ໂດຍບ ໍ່ ເສ ັ ຽຄ່າ, ແມ ່ ນມ ີ ພ ້ ອມໃຫ້ທ່ານ. UT SELECT Prescription Drug 1-800-818-0155.

Persian (Farsi)
توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فر اهم باشد. با UT SELECT Prescription Drug 1-800-818-0155 تماس بگیرید.

German
ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer UT SELECT Medical 1-866-882-2034.

Gujarati
ચુચના: જો તમે ગુજરાતી બોલતા હો, તો નિશ્ચિત ભાષા સહાય સેવા માટે તમારા માટ ઉપલબ્ધ છ. કોલ કરો UT SELECT Prescription Drug 1-800-818-0155.

Russian
ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните UT SELECT Prescription Drug 1-800-818-0155.

Japanese
注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。 UT SELECT Prescription Drug 1-800-818-0155 まで、お電話にてご連絡ください。
2017-2018 UT Benefits Contacts

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

UT HEALTH SCIENCE CENTER TYLER
Office of Human Resources
(903) 877-7784
Fax: (903) 877-5394
benefits@uthct.edu

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

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

UT MD ANDERSON CANCER CENTER
Human Resources Benefits
(713) 745-6947
Fax: (713) 745-7160
hrbenefits@mdanderson.org
Physicians Referral Service (PRS)
(713) 792-7600
Fax: (713) 794-4812
prsfacbensrvs@mdanderson.org

UT SOUTH WESTERN MEDICAL CENTER
Human Resources/Employee Benefits Division
(214) 648-9830
Fax: (214) 648-9881
benefits@utsouthwestern.edu

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

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

UT SYSTEM ADMINISTRATION
Office of Human Resources
(512) 499-4587
Fax: (512) 499-4380
esc@utsystem.edu

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

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

UT TYLER
Office of Human Resources
(903) 566-7467
Fax: (903) 565-5690
hrbenefits@utttyler.edu

UT HEALTH SCIENCE CENTER HOUSTON
Employee Benefit Services
(713) 500-3935
Fax: (713) 500-0342
benefits@uth.tmc.edu

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

UT RIO GRANDE VALLEY
Brownsville
Office of Human Resources-Benefits
(956) 882-8205
Fax: (956) 882-6599
benefits@utrgv.edu
Edinburg
Office of Human Resources-Benefits
(956) 665-2451
Fax: (956) 665-3289
benefits@utrgv.edu
2017-2018 UT Benefits Contacts | Plan Administrators

INSURANCE PLAN ADMINISTRATORS

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

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

UT SELECT PART D PRESCRIPTION
(Express Scripts)
Group: UTPARTD
(800) 860-7849
24hrs a day 7 days a week
www.express-scripts.com/ut

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

LIVING WELL HEALTH PROGRAM
livingwell@utsystem.edu.
www.livingwell.utsystem.edu

UT SELECT DENTAL and
UT SELECT DENTAL PLUS
(Delta Dental)
Group: 5968
(800) 893-3582
M-F 8:00 AM-6:30 PM CT
www.deltadentalins.com/
universityoftexas

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

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

GROUP TERM LIFE, AD&D, AND
DISABILITY
(Dearborn National)
Group: GF71778
(866) 628-2606
M-F 7:00 AM-7:00 PM CT
www.dearbornnational.com/ut

RETIREMENT PROVIDERS

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

VOYA FINANCIAL (formerly ING)
(866) 506-2199
M-F 7:00 AM-9:00 PM CT
Sat 7:00 AM-3:00 PM CT
https://utexas.prepare4myfuture.com

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

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

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

What Do We Do & How Can You Find Help?

<table>
<thead>
<tr>
<th>INSTITUTION</th>
<th>UT BENEFITS</th>
<th>PLAN ADMINISTRATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address Change</td>
<td>Monthly Newsletters</td>
<td>Plan Details</td>
</tr>
<tr>
<td>Life Events / Change of Status</td>
<td>Legal Notices</td>
<td>ID Cards</td>
</tr>
<tr>
<td>Eligibility</td>
<td>Plan Guides</td>
<td>Value Added Benefits</td>
</tr>
<tr>
<td>Rates</td>
<td>Annual Enrollment</td>
<td>Claim Issues</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Customer Service</td>
</tr>
</tbody>
</table>

Annual Enrollment & Resource Guide | for Employees 19
Annual Enrollment is July 15 - 31
Important News About Your UT Benefits and Annual Enrollment is Enclosed.

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