

BENEFIT⁺ GUIDE



JANUARY 1–DECEMBER 31 | 2025



**VALPARAISO
UNIVERSITY**



WELCOME






Valparaiso University would not be the success it is today without the dedication of our hard-working employees. We are proud to offer a comprehensive benefits package to support your physical, mental, and financial wellness.

This guide highlights the options available to you as a benefits-eligible employee.




Please take time to review this guide so you can make informed decisions and get the most from your benefits.



TIPS FOR *USING* THIS GUIDE

- ✓ View this guide on your computer, tablet, or smartphone. It's designed to let you easily navigate through your benefits!
- ✓ Use the icons at the top-left to jump to these sections:
 -  **Table of Contents**
 -  **Benefit Contacts**
 -  **Provider Search Instructions**
 -  **Benefit Glossary**
- ✓ When you see the **CURSOR ICON**  click or tap for more information.
- ✓ Open the **SEARCH BAR** to type in a key word you want to find:
 - **On your computer:** Type **Ctrl + F**.
 - **On your smartphone:** In the bottom menu, tap the three dots for more options, tap “**Find in page.**” Then, tap on the top search bar to type in your search term.

TIPS FOR *SAVING* THIS GUIDE

- ✓ **On your computer:** Save the link as a bookmark on your browser.
- ✓ **Add on your smartphone home screen:**
 - On Android, tap the options menu. 
 - On iPhone, tap the share icon. 
 - Select **Add to Home Screen** (you might need to scroll to find it).
 - Give the guide a name you'll remember, then click **Add**.
 - The icon will appear as a Red “A” on your home screen. 



WHAT'S NEW FOR 2025

We evaluate our benefits each year to ensure we are offering the best coverage and service for our valued employees.

This year, we are excited to introduce some new benefits and enhancements effective Jan. 1, 2025.



BENEFIT UPDATES

Medical ID Cards | Anthem will send out new ID cards by Jan. 1.

Medical Plan | Due to IRS regulations, we have had to increase the deductibles and out-of-pocket maximums for the HSA plan. To create equity across both plans, the PPO plan deductibles and out-of-pocket maximums will also increase.

Medical & Dental Rates | There will be a slight increase in employee contributions for the dental and medical plans. To maintain equitable distribution of the shared employee costs, medical rates will be increased by salary band.

Health Savings Account Contributions | Your contribution amount will no longer be rolled over from the previous year. You must choose a contribution amount for 2025.

Flexible Spending Account | If you want to contribute to an FSA in 2025, you must enroll during the open enrollment period.

ENROLL BY NOVEMBER 17, 2024!

Open Enrollment is November 3 through November 17. This is your annual opportunity to review and update your benefits. Don't miss out!

After you have reviewed your benefit options, log on to bit.ly/ValpoEnroll to make your selections.



Tip: Click here to jump back to this page!

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COVERING YOU & YOUR FAMILY



EMPLOYEES

Valparaiso University is proud to offer a comprehensive benefits package to eligible, full-time employees who work at least 30 hours per week.

DEPENDENTS

Many of the plans allow you to cover your eligible dependents, which include:

- Legally married spouse
- Dependent children including:
 - Children up to age 26 regardless of student or marital status
 - Disabled children of any age who are (or become) physically or mentally incapable of self-support



WHEN CAN YOU ENROLL IN BENEFITS?

NEW HIRE

Enroll within your new-hire enrollment window.

Enroll on bit.ly/ValpoEnroll

Closely review your options as a new hire

- The benefits you select become effective on the first day of the month following your date of hire
- Some benefits include special enrollment opportunities that are only available when you first enroll, so don't miss out!
- You are automatically enrolled in the 403(b) retirement plan with TIAA

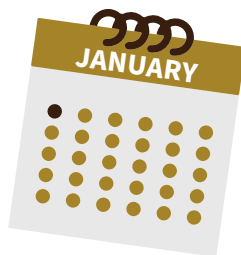
OPEN ENROLLMENT

Enroll during the annual benefits open enrollment period.

Enroll on bit.ly/ValpoEnroll

Your annual opportunity to review & change your benefits

- Typically held in the fall
- The benefits you select become effective on Jan. 1



QUALIFYING LIFE EVENT

Enroll within 30 days of a qualifying life event.

Enroll on bit.ly/ValpoEnroll

“Qualifying life events” allow you to make a mid-year benefit change

Examples include:

- Marriage or divorce
- Birth or adoption of child
- You and/or your dependents become eligible or lose coverage with another group health plan
- Spouse's open enrollment
- Change in work status (part-time to full-time)



ENROLLMENT INSTRUCTIONS

Enrolling in benefits is easy on our online enrollment portal. Follow these instructions to log in and make your selections.

ENROLLMENT CALL CENTER

Valparaiso University provides an enrollment call center to assist you with things like:

- Resetting forgotten user names or passwords
- Answering general benefit questions on plan design and cost
- Enrolling you over the phone

Call 833-748-6855 between 7 a.m. to 4 p.m. CDT for assistance!



1. STEP ONE

PREPARE

1. Log in to the self-service platform.
2. Click on the Employees Tab
3. Click on the Benefit Enrollment Link Tab
4. Follow the prompts to enroll in/waive each benefit
5. Once you are enrolled you will be given a Confirmation Number and Statement
6. Call 833-748-6855 for enrollment assistance. The enrollment call center is available 7 a.m. to 4 p.m. CT

You can also enroll at bit.ly/ValpoEnroll with your Valpo Google account ID and password.

2. STEP TWO

SET YOURSELF UP FOR SUCCESS

1. Download this benefit guide and share it with your dependents. It might be helpful as you seek care throughout the year.
2. Save important numbers and websites in your phone so you'll be ready to take advantage of all Valparaiso University's resources.



HEALTH BENEFITS





Tip: Click here to find an in-network provider

MEDICAL BENEFITS



PLAN OPTIONS	PPO PLAN	HSA PLAN
	IN-NETWORK*	IN-NETWORK*
NETWORK	Blue Access	Blue Access
PLAN BASICS		
Deductible Individual Family	\$2,300 \$4,600	\$3,300 \$6,600
Coinsurance Member Pays Plan Pays	20% 80%	0% 100%
Out-of-Pocket Maximum Individual Family	\$4,300 \$8,600	\$3,300 \$6,600
Eligible for Health Savings Account?	No	Yes! Learn more on page 14.
WHAT YOU PAY WHEN YOU NEED CARE		
Preventive Care 🦋	No charge	No charge
Doctor Visits Primary Care Specialist	\$30 \$60	0% after deductible
Emergency Care Urgent Care ER	\$50 \$250 then 20% (deductible waived)	
Inpatient & Outpatient Services	20% after deductible	
Diagnostic Imaging (ex: MRI, CT, PET scans)	20% after deductible	
WHAT YOU PAY FOR PRESCRIPTION DRUGS		
Prescription Out-of-Pocket Maximum Individual Family	\$3,000 \$6,000	Combined with medical
Retail Pharmacy (up to 30-day supply) Tier 1 2 3 4	Greater of: 10% or \$10 20% or \$30 30% or \$50 30% or \$100	0% after deductible (Specialty limited to 30-day supply. Prior authorization required.)
Mail-Order (up to 90-day supply) Tier 1 2 3 4	Greater of: 10% or \$10 20% or \$60 30% or \$100 N/A	

*Out-of-network coverage is available on this plan. Please refer to the benefit summary for more information.



Tip: Click here to find an in-network provider

MEDICAL BENEFITS

CONTINUED



	PPO PLAN			HSA PLAN		
	NO PWP	1 PWP	2 PWP	NO PWP	1 PWP	2 PWP
YOUR MEDICAL COSTS PER PAYCHECK (LESS THAN \$50,000 ANNUAL INCOME)						
Employee	\$135.09	\$110.09	–	\$100.58	\$75.58	–
Employee + Spouse	\$270.95	\$245.95	\$220.95	\$201.92	\$176.92	\$151.92
Employee + Child(ren)	\$224.73	\$199.73	–	\$166.06	\$141.06	–
Employee + Family	\$373.37	\$348.37	\$323.37	\$262.93	\$237.93	\$212.93
YOUR MEDICAL COSTS PER PAYCHECK (\$50,000–\$100,000 ANNUAL INCOME)						
Employee	\$140.29	\$115.29	–	\$104.45	\$79.45	–
Employee + Spouse	\$281.37	\$256.37	\$231.37	\$209.69	\$184.69	\$159.69
Employee + Child(ren)	\$233.38	\$208.38	–	\$172.45	\$147.45	–
Employee + Family	\$387.73	\$362.73	\$337.73	\$273.04	\$248.04	\$223.04
YOUR MEDICAL COSTS PER PAYCHECK (MORE THAN \$100,000 ANNUAL INCOME)						
Employee	\$146.94	\$121.94	–	\$109.40	\$84.40	–
Employee + Spouse	\$294.71	\$269.71	\$244.71	\$219.63	\$194.63	\$169.63
Employee + Child(ren)	\$244.44	\$219.44	–	\$180.62	\$155.62	–
Employee + Family	\$406.11	\$381.11	\$356.11	\$285.98	\$260.98	\$235.98

PWP is the Personal Wellness Profile - Employee and Spouse earn separate \$25 participation credits.



SECOND OPINIONS & COMPLEX CARE



WHAT IS EDISON HEALTHCARE?

Edison Healthcare gives you a choice in your medical care, allowing you to receive a qualified second opinion, surgery, and treatment plan from America's top medical centers.

Edison manages a private network of internationally acclaimed SmartCare Centers. Eligible members (plus a caregiver) can take advantage of travel, meals, hotels, and rental cars as part of the VIP all-inclusive service.

COVERING YOU AND YOUR FAMILY

If you, or covered family members, are facing surgery or have received a complex diagnosis from this covered list, Edison can help!

- Spine
- Back & Neck
- Orthopedic & Joint (Knee, Hip, Shoulder)
- Heart & Valve
- Cancer (Diagnosis, Surgery & Treatment)
- Pediatric Complex Care & Surgery
- Adult Complex Care & Surgery

WHAT YOU NEED TO DO

Understanding this life-changing benefit is important. Your care team is here to help you and your family through the healthcare process of making informed decisions, receiving a proper diagnosis, and experiencing the VIP care you deserve.

If you have any questions about Edison's covered procedures or second opinions benefit, please reach out by phone or email, and your dedicated care coordinator will help you.

WHAT DOES IT COST?

PPO plan: There is no cost to you.

HA plan: You will enjoy a lower deductible (single: \$1,650 | family: \$3,300) and out-of-pocket cost.

LEARN MORE

Call | 866-982-7988

Email | EHC@EdisonHealthcare.com





HEALTH CLINIC



MARATHON HEALTH SERVICES

Marathon Health is Valparaiso University's on-site clinic provider. You can schedule appointments through the Marathon Health online portal.

Services are available to all benefits-eligible faculty and staff and to dependents age six and up who are covered under the Valparaiso University medical plan.

SERVICES INCLUDE:

- Personal primary care
- On-site lab
- Preventive screening (physicals, skin cancer, Pap, etc.)
- On-site Rx (over 80 generic prescriptions available)
- Personal health coaching
- Chronic condition management
- Value-based referrals
- Online employer health portal

MARATHON HEALTH @ VALPARAISO UNIVERSITY HOURS

Monday: 7 a.m. to 4 p.m.

Tuesday: 8 a.m. to 5 p.m.

Wednesday 7 a.m. to 4 p.m.

Thursday: 8 a.m. to 5 p.m.

Friday: 7 a.m. to 4 p.m.

SERVICE AT NO COST

Services and prescriptions provided at the clinic are **free!**

If you choose not to change primary care physicians, information from clinic visits may be forwarded to your chosen primary care physician.

LEARN MORE

Marathon-Health.com

SIGN IN TO THE PORTAL

My.Marathon-Health.com/login

REQUEST AN APPOINTMENT

Visit | My.Marathon-Health.com/login

Call | 866-434-3255





HEALTHCARE CONCIERGE

HEALTHCARE IS COMPLICATED. HEALTHJOY MAKES IT SIMPLE.

Engage with HealthJoy to ensure that you have the lowest possible medical costs all year and the best access to care.

DOWNLOAD THE APP

Click the buttons below to download.



HealthJoy is the first stop for all your healthcare and employee benefits needs.

- HealthJoy is provided free by Valparaiso University and personalized for you
- Get instant access to an up-to-date benefits wallet with all your benefit cards
- Ask a healthcare concierge for help with healthcare questions
- Save time, money, and a ton of aggravation

WHO IS ELIGIBLE TO ACCESS HEALTHJOY?

HealthJoy is available to all benefits-eligible employees.

GET STARTED

Engage with HealthJoy to ensure that you have the lowest possible medical costs all year and the best access to care by following these two easy steps:

1. Download HealthJoy to your smart phone and register as a member.
2. Provide HealthJoy with the list of doctors, pharmacies and labs that you want to go see.

HealthJoy can reach out to each of your providers and make sure that your next appointment is easy and the lowest possible cost.



HEALTH SAVINGS ACCOUNT

By enrolling in the HSA medical plan, you get access to a Health Savings Account (HSA), which can be used to pay for qualified healthcare expenses.

ELIGIBILITY

Anyone who fits **all** the following conditions may contribute to an HSA:

- ✓ **IS** enrolled in an HSA-eligible HDHP medical plan.
- x **IS NOT** enrolled in Medicare, Tri-Care, Medicaid, or a medical plan with copays.¹
- x **IS NOT** eligible to be claimed as a dependent on someone else's tax return.

HSA CONTRIBUTIONS

You can contribute up to the IRS annual maximum, which is based on your age and enrollment in the HSA medical plan. During your enrollment period, you will be required to identify your contribution amount. Your contribution amount will no longer be rolled over from the previous year.

2025 IRS Contribution Limit	UNDER AGE 55	AGE 55+
Individual	\$4,300	\$5,300
Family (one or more dependents)	\$8,550	\$9,550

¹**Medicare & your HSA:** Because enrollment in Part A is backdated by six months, you should stop your HSA contributions six months prior to enrollment to avoid penalties. Consult your tax advisor for guidance.

Back to your medical plan options. 

THREE REASONS TO LOVE YOUR HSA

1. TRIPLE TAX SAVINGS.*

- Tax deductions when you contribute to your account
- Tax-free withdrawals to pay for qualified medical expenses
- Tax-free earnings

2. IT'S FLEXIBLE.




You can use the money in your HSA for eligible health expenses or save it and let it grow. Your HSA savings roll over year after year, so it's there when you need it.

3. USE IT FOR RETIREMENT

When you reach a certain balance, you can invest your HSA. And you can use it as retirement income at age 65 without penalty (normal income tax still applies).

**Please note that state taxes still apply in some states.*

Visit HSASore.com/learning-center.html and watch the videos below to learn more!

-  **HSA Basics**
-  **Tax Advantages**
-  **Eligible Expenses**



GETTING STARTED WITH YOUR HSA



Lively is Valparaiso University's HSA partner. If you enroll in the HSA medical plan, you'll want to make sure you set up your HSA so you can take advantage of the tax savings this plan offers.

1 | CHECK YOUR EMAIL

You will receive an email from Lively to enroll for your new HSA. Click on the "Complete Enrollment Now" button within the email to get started.

2 | COMPLETE ENROLLMENT

You will be redirected to the Lively website to complete your enrollment. Depending on how your employer enrolled you and your colleagues, be prepared to provide:

- A secure password
- Your social security number

Some information was likely already supplied by your employer, but please double check that the information listed is correct. Be sure to also agree to Lively's terms and conditions.

3 | VIEW YOUR NEW LIVELY DASHBOARD

Once you submit terms and conditions from our banking partner, you will be directed to your new Lively dashboard. Once you begin contributing and using your Lively debit card (which will be mailed to you), you will see information such as your recent contributions, purchases, and how much of your deductible you've spent thus far. Be sure to download the "Lively HSA" mobile app, available for iOS and Android, to take your HSA on the go.

4 | CHECK YOUR EMAIL (AGAIN)

You will receive a verification email from Lively to ensure that the new email address that you listed is the correct one.

5 | VERIFY YOUR ELIGIBILITY

You will need to be enrolled into a qualified health plan or have an existing HSA to enroll into your new Lively account. If your employer enrolled you, you are qualified for an HSA. If you have an existing HSA at a different provider, you can mark that you would like to transfer your assets over to Lively on this page. You can also transfer your funds after you fully set up your account.

6 | CONNECT YOUR EXTERNAL BANK ACCOUNT (OPTIONAL)

While this step is optional, we recommend connecting an external bank account to your Lively HSA. You can use this to add direct contributions or to reimburse yourself for eligible HSA expenses paid out-of-pocket.

7 | REVIEW TERMS AND CONDITIONS

Check the box to acknowledge you agree to their terms and conditions from our banking partner, Centier Bank.

8 | VIEW YOUR DASHBOARD & DOWNLOAD THE APP

Next, you will be directed to your Lively dashboard. Once you begin contributing and using your Lively debit card (which will be mailed to you), you will see information on your recent contributions, purchases, and how much of your deductible you've spent thus far. Be sure to download the "Lively HSA" mobile app to take your HSA on the go.

QUESTIONS?

Call | 888-874-0517

Email | Support@LivelyMe.com

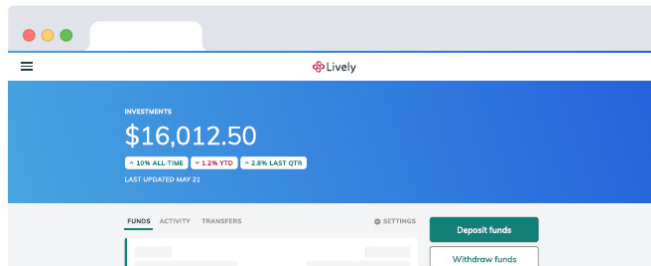


GETTING STARTED WITH YOUR HSA

CONTINUED

Tax-free investing is one of the most valuable benefits of owning an HSA. Lively offers access to two personalized solutions to help you make your money go further: Schwab Health Savings Brokerage Account (Charles Schwab) and HSA Guided Portfolio (Devenir).

Regardless of what your investment strategy is, you have easy access to industry-leading solutions to help you design your ideal portfolio and build toward your financial goals.



The investment experience is securely integrated using single-sign on (SSO).

You do not need to maintain a separate login and can access your investment account directly within your Lively dashboards.

Even when you're on the go, Lively's top-rated HSA mobile app (iOS and Android) makes it easy to stay on top of your investments.

DOWNLOAD THE APP

Click the links below to get the app!



MAKE TAX-FREE SAVINGS WORK HARDER

PERSONALIZED INVESTMENT STRATEGY

You can choose to invest your HSA funds the way that is right for you, whether you prefer a low-effort guided solution or prefer to hand-pick your investments.

FIRST-DOLLAR INVESTING

You have the option to start investing your HSA funds as soon as possible with both solutions. You are in control and can set up your accounts to align with your investment strategy.

AUTOMATED TRANSFER FEATURES

You can set either recurring or sweep transfers from your Lively HSAs to your investment accounts. So it's effortless for you to make the most of your tax-free savings.





PRESCRIPTION SAVINGS



TrueScripts provides you with personalized support to help you manage and reduce your prescription drug costs.

You can contact TrueScripts whenever you have questions or need help navigating your pharmacy benefits. If you find that you're paying a lot for your medications, they can often find ways for you to save!

PRICEPROTECTOR+, POWERED BY GOODRX

TrueScripts ensures you get the greatest savings possible while getting credit toward your deductible and out-of-pocket maximum.

With PriceProtector+, TrueScripts will automatically apply GoodRx discount card pricing if it is lower than the cost through your medical plan. No shopping around, no forms to send in, no headaches!

Learn more about *PriceProtector+*. 🐘

ACCESS PHARMACY RESOURCES

TRUESCRIPTS MEMBER PORTAL

Register online to manage your pharmacy benefits.

MemberPortal.TrueScripts.com 🐘

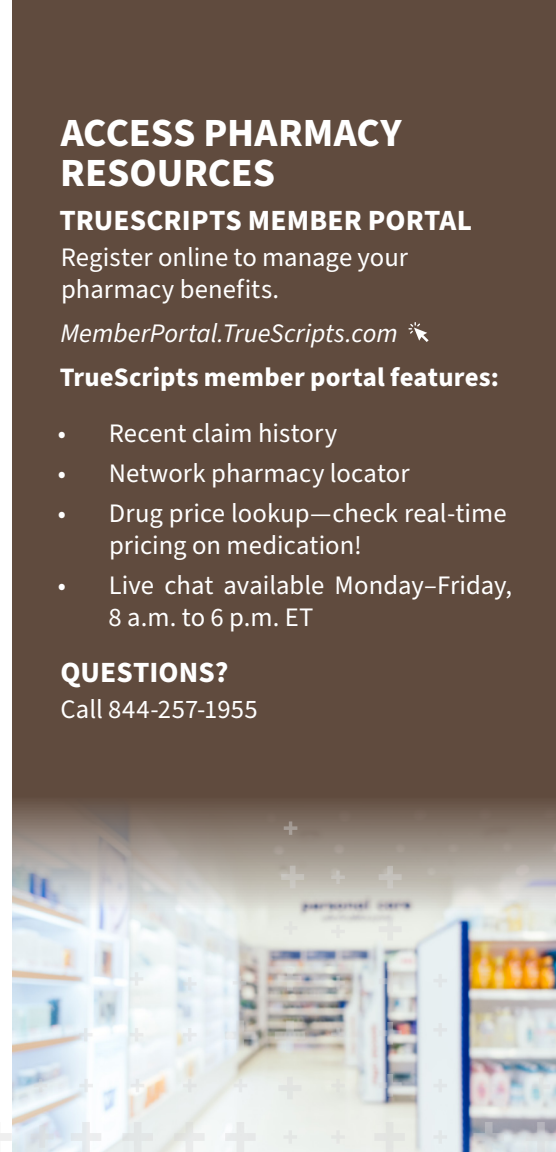
TrueScripts member portal features:

- Recent claim history
- Network pharmacy locator
- Drug price lookup—check real-time pricing on medication!
- Live chat available Monday–Friday, 8 a.m. to 6 p.m. ET

QUESTIONS?

Call 844-257-1955

Back to your medical plan options. 🐘





THE IMPORTANCE OF PREVENTIVE CARE



GET THE MOST OUT OF YOUR MEDICAL PLAN

Your medical plan covers in-network preventive care services at no cost to you! Preventive care can help keep you healthy and identify minor issues early, when they're easier—and less costly—to treat.

WHAT IS PREVENTIVE CARE?

Preventive care includes a range of services to help keep you healthy. While regular (diagnostic) medical care focuses on treating illness, preventive care aims to keep you from getting sick in the first place.

WHAT IS NOT PREVENTIVE CARE?

If you see a doctor because you have symptoms or have been diagnosed with an illness, the services you receive are not preventive.

Your medical plan still provides coverage for these services, but they are not covered at 100%.

Note: Your medical plan may charge a fee if you receive services from an out-of-network provider or if the preventive service is not the primary purpose of your office visit.

SEE WHAT PREVENTIVE TESTS AND SCREENINGS ARE RECOMMENDED FOR YOUR AGE

Go to [Anthem.com/preventive-care/](https://www.anthem.com/preventive-care/). 

Call the insurance company to confirm which preventive services are covered under your medical plan.



VIRTUAL VISITS

AN AFFORDABLE OPTION FOR QUALITY MEDICAL CARE

Visit with a doctor any day, any time, from your smartphone, computer or tablet. Telehealth is an easy and convenient option when you need care for yourself or your child in the middle of the night or while traveling.

USE TELEHEALTH FOR:

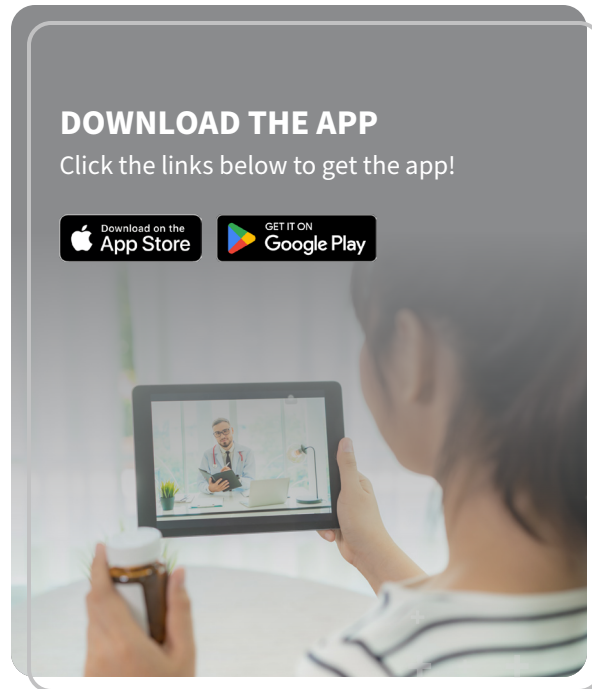
Cold & Flu symptoms | Allergies | Pink eye | Respiratory Infection | Sinus + skin problems | Mental health counseling | And more!

GET STARTED!

Visit | LiveHealthOnline.com

DOWNLOAD THE APP

Click the links below to get the app!





HEALTHCARE ON THE GO



YOUR SYDNEY HEALTHCARE APP

With Sydney, you can find everything you need to know about your Anthem benefits—personalized and all in one place. Sydney makes it easier to get things done, so you can spend more time focused on your health.

- Access your digital ID card
- Find care and check costs
- View your benefits coverage
- Check claims and deductible expenses
- Get answers even faster with the chatbot

DOWNLOAD THE APP

Visit | SydneyHealth.com for a link to download the app.



Back to your medical plan options. ✨



TIPS TO SAVE MONEY

✓ **SAVE THE EMERGENCY ROOM FOR TRUE EMERGENCIES**

Only visit the emergency room if you have a life- or limb-threatening emergency. If you need care when your doctor's office is closed, check your area for an urgent care location or use virtual care instead.

✓ **USE IN-NETWORK PROVIDERS**

Your medical, dental and vision costs increase greatly when you visit a provider who is not in your plan's network. Always confirm your provider is in your network, especially when being referred to another provider or facility for services.

✓ **VISIT THE FREE ON-SITE CLINIC**

Use the clinic for services like primary care and health coaching, on-site lab and generic medications, preventive screenings, chronic condition management, and more!

✓ **GET A SECOND OPINION**

If you are considering a surgery or have a complex diagnosis, Edison Health can help you get a second opinion, so you can have more confidence in your treatment plan and get access to high-quality care from America's top medical centers.

✓ **CHOOSE GENERIC PRESCRIPTIONS**

Ask your doctor or pharmacist to give you generic prescriptions instead of brand-name. Generic drugs are cheaper and are just as effective.

✓ **SHOP AROUND TO FIND THE BEST PRESCRIPTION PRICES**

It can pay to shop around. Drug comparison tools like *GoodRx.com* and *SingleCare.com* can help you find the lowest cost for medication near you.

Good news! TrueScripts automatically applies GoodRx discounted pricing to your generic prescriptions. The amounts you pay will be automatically credited to your deductible and out-of-pocket maximum where appropriate. *See page 17 to learn more.* ✨

✓ **TAKE ADVANTAGE OF THE MAIL-ORDER PHARMACY PROGRAM**

Save time and money by using the mail-order prescription drug program for your maintenance prescriptions. Check with your insurance company for more details.




Tip: Click here to find an in-network provider



DENTAL BENEFITS

PLAN OPTION	DENTAL PLAN	
	IN-NETWORK	OUT-OF-NETWORK*
NETWORK	DentalGuard Preferred	
PLAN BASICS		
Calendar-Year Deductible Individual Family	\$50 \$150	\$50 \$150
Maximum Benefit for Basic & Major Services Per Person Per Year	\$1,000	\$1,000
WHAT YOU PAY FOR SERVICES		
Preventive Services (cleanings, exams, x-rays)	No charge (deductible waived)	No charge (deductible waived)
Basic Services (fillings, extractions)	80% after deductible	80% after deductible*
Major Services (crowns, bridgework)	50% after deductible	50% after deductible*
YOUR COST PER PAY PERIOD		
Employee	\$19.07	
Employee + 1	\$38.95	
Employee + Family	\$67.05**	

 ***Be aware of balance billing if you use an out-of-network dentist.** If your dentist is out-of-network and they charge more than what the plan allows, you are responsible for the extra charges. Save money by staying in-network! See Benefit Glossary on page 37 for more details.

**Employees with more than one child pay the family rate on the dental and vision plans.



DENTAL MAXIMUM ROLLOVER



Guardian will roll over a portion of your unused annual maximum into your personal Maximum Rollover Account (MRA). If you reach your Plan Annual Max in future years, you can use money from your MRA!

To qualify for an MRA, you must have a paid claim and must not have exceeded the paid claims threshold (**\$500**) during the benefit year. Your MRA may not exceed the MRA limit.

You can view your annual MRA statement detailing your and your dependents' accounts at GuardianAnytime.com.

HOW THE ROLLOVER WORKS



STEP 1

Make preventive visits to help minimize **major dental issues**.



STEP 2

Submit claims for dental work throughout the plan year.

AT THE END OF THE YEAR

For members who submit at least one paid claim and do not exceed their plan threshold (**\$500**), a portion of any unused amount in the annual dental maximum will be added to the Maximum Rollover Account.

These funds are available to pay for future dental care.

MAXIMIZE YOUR ROLLOVER

If care is provided by dentists in the network, you can roll over more money!

- Max rollover with **out-of-network** dentists: **\$250**
- Max rollover with **in-network** dentists: **\$350**





Tip: Click here to find an in-network provider



VISION BENEFITS

PLAN OPTIONS

NETWORK

PLAN BASICS

Eye Exam

(once every 12 months)

\$10 copay

Eyeglass Lenses

Single | Bifocal | Trifocal | Lenticular

(once every 12 months)

\$10 copay

Frames

(once every 12 months)

\$130 allowance +
20% discount on remaining amount

Contact Lenses—instead of glasses

(once every 12 months)

Elective: \$130 allowance
Medically Necessary: \$10 copay

YOUR COST PER PAY PERIOD

Employee

\$5.68

Employee + 1

\$9.63

Employee + Family

\$14.67**

***Out-of-network coverage available on this plan.** Refer to the benefit summary for more information.

**Employees with more than one child pay the family rate on the dental and vision plans.

A close-up photograph of a woman with long, wavy blonde hair and a young child with blonde hair. They are both smiling warmly and leaning their heads against each other. The woman is on the right, and the child is on the left, wearing a yellow jacket with a red hood. The background is a soft, out-of-focus outdoor setting.

FINANCIAL BENEFITS



FLEXIBLE SPENDING ACCOUNTS



Flexible Spending Accounts (FSAs) allow you to set aside money from your paycheck to pay for eligible healthcare and dependent care expenses with tax-free dollars. By participating in an FSA, you can reduce your taxable income and enjoy 20–30% savings on expenses you are already paying! Learn more and find resources for managing your account at [iSolvedBenefitServices.com](https://www.isolvedbenefit.com).

HOW IT WORKS:



1. Estimate your expenses and decide how much you want to contribute.



2. Your contributions are deducted each paycheck before taxes are applied and set aside in your FSA.



3. During the year, use your FSA debit card to pay for eligible expenses or reimburse yourself from your account.

ACCOUNT	USE FOR	ANNUAL CONTRIBUTION LIMITS
HEALTHCARE FSA <i>(not available for HSA participants)</i>	Medical, dental and vision expenses for yourself, your spouse and your dependent children See what's eligible at FSAStore.com/fsa-eligibility-list .	\$3,200 (subject to change when IRS releases 2025 limits) <ul style="list-style-type: none"> • All funds are immediately available to you at the beginning of the plan year • Allows you to roll over up to \$640 of unused money into the following plan year
LIMITED PURPOSE FSA	Similar to the Healthcare FSA, but in order to comply with HSA eligibility rules, it is limited to dental and vision expenses.	
DEPENDENT CARE FSA	Dependent care expenses for a dependent parent or a child under age 13 that allow you to go to work. (Ex: Daycare, day camp, after-school programs.)	\$5,000 (\$2,500 if married and filing separate tax returns) <ul style="list-style-type: none"> • Funds are available as they are contributed • No rollover permitted

Estimate Carefully! FSAs are “use it or lose it” accounts. That means any unused money at the end of the year is forfeited, so only contribute what you know you will spend in the year. The one exception to the “use it or lose it” rule is the rollover, which allows you to rollover \$640 on Healthcare FSAs and Limited Purpose FSAs (subject to change when IRS releases 2025 limits).



LIFE INSURANCE

BASIC LIFE AND AD&D

To help provide financial security for your family in the event of death or dismemberment, we provide basic term life and accidental death & dismemberment (AD&D) for a small contribution deducted from your paycheck.

This benefit will terminate when your employment terminates or upon retirement, and benefits will reduce according to age.

Life coverage amount for all full-time employees

Up to \$50,000



KEEP YOUR BENEFICIARY INFORMATION UP TO DATE!

Life and AD&D benefits are paid to the beneficiary on file, so make sure you keep your beneficiary information up to date!

You can change your beneficiary information at any time on your benefit enrollment platform.





LIFE INSURANCE

CONTINUED

SUPPLEMENTAL LIFE AND AD&D (EMPLOYEE-PAID)

Supplemental life and AD&D insurance provides an extra layer of financial security for your family.

You can give your loved ones greater peace of mind in the face of unforeseen circumstances by purchasing voluntary coverage at competitive group rates.

LIFE AND AD&D COVERAGE OPTIONS

Employee Benefit

\$10,000 increments up to \$200,000
Benefits reduce to 67% at age 70 and to 34% at age 75.

Spouse Benefit

\$20,000 increments up to \$40,000
(not to exceed 100% of employee's election)
Spousal coverage terminates at age 70.

Child Benefit

Birth to 6 months: \$500
Over 6 months but under 23 years: \$10,000

Note: Your cost for voluntary life and AD&D varies by age and coverage amount (Spousal rates are based on the age of the employee). You can see your cost when you enroll online.





DISABILITY INSURANCE

Disability benefits replace a portion of your income if you're unable to work due to a non-work-related injury or sickness.

Valparaiso University provides short-term and long-term disability coverage **at no cost to you.**

SHORT-TERM DISABILITY

Benefit amount	Day 1-31: 100% of weekly earnings up to \$1,200 per week Day 32-182: 60% of weekly earnings up to \$1,200 per week
When are benefits payable?	After 8th day of disability due to accident or sickness
Maximum benefit duration	26 weeks

Note: Short-term disability for staff is administered by Lincoln Financial Group. Faculty Salary Continuance will remain administered by the University. Please reference the Faculty Handbook Section 5.2.3 for the schedule of benefits.

LONG-TERM DISABILITY

Benefit amount	60% of your salary up to \$5,000 per month
When are benefits payable?	After 6 months of disability due to accident or sickness
Maximum benefit duration	Reduced Benefit Duration with Social Security Normal Retirement Age (SSNRA)

LFG group administers LTD for Faculty and Staff at Valparaiso University.

THE IMPORTANCE OF DISABILITY INSURANCE

Chances of missing work due to illness, injury, or pregnancy are greater than most realize.



1 in 4 people will experience a disabling condition in their working years.*

If you couldn't work and earn an income, how would you pay your bills? Disability insurance can help!

**Source: Council for Disability Awareness. Working years defined as age 20 through retirement age.*



RETIREMENT SAVINGS



The University participates in a Defined Contribution Plan offered through TIAA.

ELIGIBILITY

If you are an eligible full-time faculty or staff member, you may participate beginning on the first day of the month, following your date of employment.

YOUR CONTRIBUTIONS

Upon eligibility, you will be automatically enrolled at a contribution rate of 4% of your salary. Please note that you must contribute at least 1%, and you can contribute up to the IRS-defined maximum throughout the year.

VALPARAISO'S CONTRIBUTIONS

If you contribute 1-2% of your income to your retirement account, you will receive a 4% contribution from the University. If you contribute 3% or more of your income to your retirement account, you will receive a 6% contribution from the University.

You may choose to contribute pretax, Roth or a combination of both and direct contributions among the plan's many investment options. You will also have 30 days to opt out completely if you do not wish to participate.

MANAGE YOUR ACCOUNT

You can make changes to your account, view your account balance and manage your investment funds at any time throughout the year.

Visit | TIAA.org/valpo

Call | 800-842-2273





ADDITIONAL BENEFITS



EMPLOYEE ASSISTANCE PROGRAM

MENTAL HEALTH COUNSELING, SUPPORT & REFERRALS FOR A WELL-BALANCED LIFE

Problems are just a part of everyday life. Lincoln Financial's Employee Assistance Program (EAP) is available to you and your immediate family members to help handle personal problems related to financial, legal and family issues. These services are available to you via phone and some via face-to-face consultations.

FOR 24/7 ASSISTANCE:

Call: 888-628-4824 | Visit: [GuidanceResources.com](https://www.guidanceresources.com)
Username: LFGsupport | Password: LFGsupport1



AN EAP CAN ADDRESS:



SUBSTANCE ABUSE & ADDICTION



LEGAL ASSISTANCE



FAMILY & RELATIONSHIPS



FINANCIAL WELLNESS



EMOTIONAL WELL-BEING



WORK & CAREER



BONUS BENEFITS



LIFEKEYS®

No matter how well you plan, unexpected challenges will arise. When they do, help and support are nearby—thanks to LifeKeys® services from Lincoln Financial Group. This benefit includes:

- Discounts on shopping and entertainment
- Help with important life matters
- Protection against identity theft
- Online will preparation
- Guidance and support for your beneficiaries

Learn more about this benefit. ✨

TRAVELCONNECT®

TravelConnect® services offer help, comfort, and reassurance—helping make travel less stressful. If you're enrolled in life and/or AD&D insurance, you and your loved ones can count on TravelConnect® services 24 hours a day, 7 days a week. From planning the trip until flying home, TravelConnect® can help you on your way.

You'll have dedicated support if you face an emergency when you're 100 or more miles from home.

Learn more about this benefit. ✨



BENEFIT RESOURCES



BENEFIT CONTACTS

BENEFIT	PROVIDER	PHONE	WEBSITE / EMAIL
Medical	Anthem	833-227-8953	<i>Anthem.com</i>
Second Opinions & Complex Care	Edison Healthcare	866-982-7988	<i>EHC@EdisonHealthcare.com</i>
Health Clinic	Marathon Health	866-434-3255	<i>My.Marathon-Health.com/login</i>
Healthcare Concierge	HealthJoy	877-500-3212	<i>Healthjoy.com/download</i>
Pharmacy	TrueScripts	844-257-1955	<i>MemberPortal.TrueScripts.com</i>
Virtual Visits	LiveHealth Online	-	<i>LiveHealthOnline.com</i>
Dental	Guardian	800-541-7846	<i>GuardianAnytime.com</i>
Vision	Guardian	877-814-8970	<i>GuardianAnytime.com</i>
Health Savings Account	Lively	888-576-4837	<i>LivelyMe.com</i>
Flexible Spending Accounts	iSolved Benefit Services	866-370-3040	<i>iSolvedBenefitServices.com</i>
Life and AD&D Insurance Disability Insurance	Lincoln Financial	800-423-2765	<i>LFG.com</i>
Retirement Plan	TIAA	800-842-2273	<i>TIAA.org/valpo</i>
Employee Assistance Program	Lincoln Financial	888-628-4824	<i>GuidanceResources.com</i> Username: LFGsupport Password: LFGsupport1



SEARCH FOR AN IN-NETWORK PROVIDER ONLINE



MEDICAL

ANTHEM

Anthem.com

1. Select “Find Care” in the top right
2. Log in with either your Anthem login credentials or by using your Identification Number listed on your Anthem ID card
3. Select a specialization and enter your zip code
4. You can then narrow your search event further and/or review details such as the expected cost of certain procedures and if they are accepting new patients.

DENTAL

GUARDIAN

GuardianAnytime.com

1. Select “Find a dental or vision provider” at the bottom of the page
2. For your Plan Type, select PPO: DentalGuard Preferred.
3. Enter your search criteria and select the search icon

VISION

GUARDIAN + VSP

VSP.com/eye-doctor

1. Enter your ZIP or Street Address, City and State
2. Under Advanced Search+ select “VSP Choice” for your doctor network
3. Select “Apply Filters”
4. Select “Search”



BENEFIT GLOSSARY

BALANCE BILLING

When you are billed for the difference between the provider's actual charge and the amount reimbursed under the medical, dental or vision plan. This occurs when you go outside of the preferred provider network. Balance billing charges will not apply toward your out-of-pocket maximum.

COINSURANCE

The percentage of the cost you pay for covered services after you meet your deductible.

COPAYMENTS (ALSO CALLED COPAYS)

A flat fee you pay for a covered healthcare service. You will typically pay your copay at the time of service, and then the plan will pay any remaining amount.

DEDUCTIBLE

The amount you are required to pay each year before certain benefits are paid for by the plan. Once you meet the deductible amount, expenses are covered by the plan based on the coinsurance percentage. The deductible resets on Jan. 1 each year.

EXPLANATION OF BENEFITS (EOB)

A statement, usually mailed to you, that explains how your claim was processed by the insurance company. The EOB details what portion of the claim was paid by the insurance company and what portion is your responsibility.

NETWORK

The doctors, hospitals, and other healthcare providers your insurance company has contracted with to provide services at discounted rates. You will pay less when you use in-network providers. Some plans will not cover the care you get outside of the network.

OUT-OF-POCKET MAXIMUM (OOPM)

The most you pay in a calendar year for covered services. If you reach the OOPM, the plan pays 100% of covered expenses for the rest of the plan year.

PLAN YEAR

The plan year refers to Jan. 1 through Dec. 31.

USUAL, CUSTOMARY, AND REASONABLE (UCR) CHARGES

Healthcare charges determined by your health insurance provider that are based on the range of fees charged by doctors with comparable training and experience for the same or similar service in your area. When you receive care in-network, UCR charges do not apply. For out-of-network care, you are responsible for any extra charge over the UCR fee.



The information in this enrollment guide is based on information provided by the employer and various benefit documents. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between this guide and the actual plan documents, the plan documents will prevail. All information is confidential pursuant to the Health Insurance Portability and Accountability Act of 1996.

Guide prepared by The MJ Companies.

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