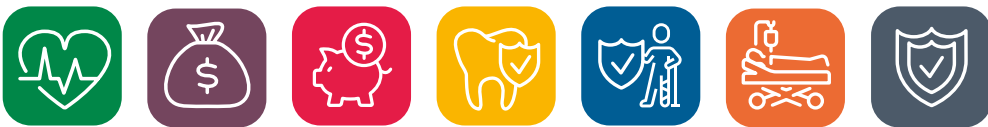




INDIANA UNIVERSITY

# 2025 IU Benefits Open Enrollment



**ENROLL ONLINE**

November 4 – 15, 2024

[oe.iu.edu](https://oe.iu.edu)



## What you need to know

Important reminders .....	04
What's new and what's changing for 2025 .....	05
Online enrollment instructions .....	07
Live webinar schedule.....	08



## Medical coverage

Eligibility and enrollment .....	09
Choosing a medical plan.....	09
Prescription drug coverage .....	10
Marathon Health employee health centers .....	12
2025 Medical Plan Premiums .....	13
2025 Medical Plans Comparison.....	14



## Dental coverage

Plan highlights & premiums .....	15
----------------------------------	----



## Health savings account (HSA)

Plan highlights .....	16
2025 HSA contribution limits.....	17



## Flexible spending accounts (FSA)

Healthcare FSA.....	18
Coordinating your healthcare FSA and HSA .....	19
Dependent care FSA .....	20



## Supplemental AD&D insurance

Plan highlights & premiums .....	21
----------------------------------	----



## Critical illness insurance

Plan highlights & premiums .....	22
----------------------------------	----



## Long-term disability insurance

**SPECIAL ENROLLMENT OPPORTUNITY**

Plan highlights & premiums .....	24
----------------------------------	----



## Additional programs, resources, & apps

Additional programs, resources, & apps .....	25
--	----



## Customer service contacts & federal notices

Customer service contacts & federal notices .....	29
---	----



## After Open Enrollment

Reviewing the rest of your IU benefits.....	30
---	----

NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

Select the **Home** icon to return to the Table of Contents.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTRACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## OPEN ENROLLMENT 2025

# How to navigate this guide

This page lists the interactive features you can use to navigate this guide.

Select a **Section Title** to navigate directly to that part of the guide.

**PRINT**

← Select this **Print** button to print a copy of this guide.



## Keep these things in mind as you prepare to elect your benefits:

01.

### Open Enrollment is your annual opportunity to change your IU benefits.

During Open Enrollment, you can enroll in, change, or continue these benefits:

- Medical & dental coverage (including signing a new Tobacco-free Affidavit for the 2025 medical premium reduction)
- Health savings account (HSA)
- Healthcare and dependent care flexible spending accounts (FSAs)
- Critical illness insurance
- Supplemental AD&D insurance
- **SPECIAL ENROLLMENT OPPORTUNITY** Long-term disability insurance

Life events can occur during the year that can affect the types of plans and amount of coverage you need. Think about the changes you and your family have experienced in the past year or anticipate in the coming year. Then determine which benefit plans and programs will suit your needs best.

02.

### Open Enrollment is for benefits-eligible employees.

The information in this guide is for full-time (75% FTE or greater) appointed academic or staff employees, sometimes referred to as "benefits-eligible" employees.

- If you're a part-time or "hourly" employee, you're not eligible for IU benefits that are part of Open Enrollment. You can learn more about any benefits or programs you may be eligible for on the [New Part-time Hourly Employee web page](#).
- If you're a medical or optometry resident, you do participate in Open Enrollment, but are eligible for different plans than employees. Check out the [Open Enrollment for Residents web page](#) to learn more.
- If you're an IU retiree, information will be mailed to your home regarding Open Enrollment. You can also check out the [Open Enrollment for Retirees web page](#) to learn more.

03.

### Enroll online between November 4<sup>th</sup> and 15<sup>th</sup>.

Open Enrollment begins on **Monday, November 4, 2024**, and **closes at 11:59 p.m. ET on Friday, November 15, 2024**. Follow the enrollment instructions on page 7 of this guide to learn how and when to make your Open Enrollment elections through the Employee Center in [One.IU](#). If you do not have internet access, contact IU Human Resources for assistance.

04.

### Some benefits require re-enrollment each year. If you do not complete online Open Enrollment:

- Your medical, dental, HSA, critical illness, and supplemental AD&D elections will continue in 2025.
- You **will not** be enrolled in the healthcare or dependent care FSA. You must re-enroll in these accounts each year.
- You **will not** receive the tobacco-free medical premium reduction. You must re-sign the affidavit or complete the free tobacco cessation program each year to receive the reduction.
- You will be required to **go through medical underwriting** (provide proof of good health) to enroll in or increase your long-term disability coverage.

05.

### The elections you make during Open Enrollment will stay in place for the entire plan year (from January 1 – December 31, 2025).

All Open Enrollment changes are effective January 1, 2025. The IRS requires these elections to remain in place for the entire year unless you experience an IRS-defined qualifying life event such as marriage or the birth of a child. These events allow you to make corresponding changes to your benefits within 30 days of the event. An exception is that you can change your HSA election at any time during the year.

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT



## What's new and what's changing for 2025

Even if you're happy with your current benefits, it's important to take this time to confirm that your coverage still aligns with your and your family's needs. Plus, some benefits require you to re-enroll each year. Be sure to review your options carefully—you won't be able to change these benefits again until the next Open Enrollment period unless you experience a major life event, such as getting married or having a baby.



### Long-term disability insurance

**SPECIAL ENROLLMENT OPPORTUNITY**

Enrollment in LTD insurance or increasing your coverage is allowed at any time during the year, but requires medical underwriting (providing proof of good health to the plan's administrator, The Standard, for approval). However, during this year's Open Enrollment period, you can enroll in LTD insurance or increase your coverage without providing proof of good health.

- No plan or premium changes for 2025.
- Employees who have previously applied and been denied coverage are not eligible to enroll during this special enrollment period.

Learn more about this plan and estimate your monthly premium on [page 24](#) of this guide.



### Medical coverage

#### All medical plans

- There will be an overall **1.5% increase** in employee contributions across all salary bands, plans, and coverage levels. [View the full chart of 2025 premiums.](#)
  - The **three lowest salary bands will be adjusted** to include more employees in the lower-cost premium groups.
- The monthly tobacco-free premium reduction will be **\$7.50** for the employee or spouse, or **\$15** for both.
- All members will be issued a **new Anthem ID card** that should be used starting January 1, 2025.
- **New partnership with Archimedes.** Beginning in 2025, specialty medications (drugs that treat complex/chronic conditions that are often high-cost and require special handling or administration) will be managed through Archimedes instead of CVS Specialty. See [page 11](#) of this guide for details.
- **Anthem will no longer offer the AllClear ID** identity protection program to medical plan members. If you utilize this service, you will receive a message directly from Anthem about options for transitioning to a private paid membership, if desired.

#### Anthem PPO HDHP

- **In-network:** Deductibles will increase to **\$2,000** for employee-only coverage and **\$4,000** for all other coverage levels. Out-of-pocket maximums will increase to **\$4,000** for employee-only coverage and **\$8,000** for all other coverage levels.
- **Out-of-network:** Deductibles will increase to **\$4,000** for employee-only coverage and **\$8,000** for all other coverage levels. Out-of-pocket maximums will increase to **\$8,000** for employee-only coverage and **\$16,000** for all other coverage levels.

#### Anthem PPO \$500 Deductible

- **In-network:** Out-of-pocket maximum for prescriptions will decrease to **\$6,800** per individual and **\$11,200** family maximum.



### Dental coverage

- No plan or premium changes.
- **All salary bands will be adjusted** to include more employees in the lower-cost premium groups. [View the full chart of 2025 premiums.](#)



# Need to know



## Health savings account (HSA)

- The IRS-defined annual contribution limit will increase to **\$4,300** for employee-only coverage, and **\$8,550** for all other coverage levels. The age 55 & older catch-up contribution will remain \$1,000.
- The university's contribution to employee HSAs will remain the same, \$1,300 for employee-only coverage and \$2,600 for all other coverage levels. Active members will receive half of IU's contribution in January, and half in July. Employee contributions will continue to be deposited with each paycheck.



## Flexible spending accounts (FSA)

### Healthcare FSA

- The annual contribution maximum will increase to **\$3,200** per individual.
- The annual carryover limit will increase to **\$640**.

### Dependent care FSA

- No changes.



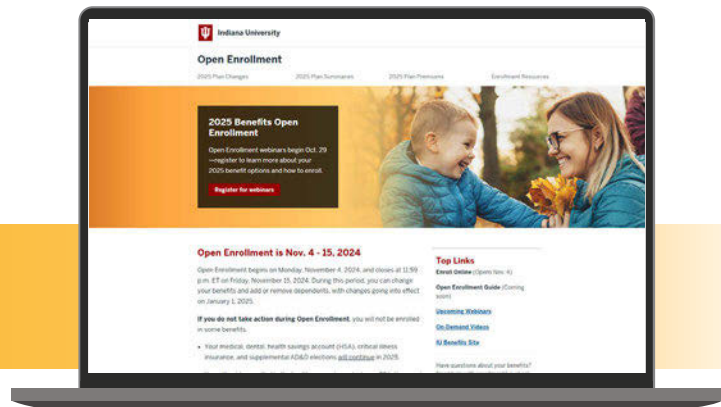
## Supplemental AD&D insurance

No plan or premium changes.



## Critical illness insurance

No plan or premium changes.



Remember to bookmark the Open Enrollment website—[oe.iu.edu](https://oe.iu.edu).

## Do I need to take action during Open Enrollment?

This table highlights the plans that require active elections during Open Enrollment versus those that will roll over into the next plan year if no changes are submitted for 2025. All employees are encouraged to participate in Open Enrollment to ensure that you're still enrolled in the appropriate plans for your needs.

Benefit plan	You must take action to enroll	No action required to continue enrollment	Notes
Medical plan		✓	Enrollment and coverage will remain the same.
Dental plan		✓	
Health savings account		✓	
Supplemental AD&D		✓	
Critical illness insurance		✓	
Tobacco-free premium reduction	✓		If you do not sign a new affidavit, you <b>will not</b> receive the \$7.50/\$15 monthly medical premium reduction in 2025.
Healthcare & dependent care flexible spending accounts	✓		If you don't re-enroll during Open Enrollment, you <b>will not</b> be enrolled and no contributions will be made.
Long-term disability insurance			Outside of this year's Open Enrollment period, you will be <b>required to provide proof of good health</b> to enroll in this plan or increase your existing coverage.









## Online Enrollment instructions

Between November 4<sup>th</sup> and 15<sup>th</sup>, follow these steps to enroll in 2025 benefits:

1. Go to [one.iu.edu](https://one.iu.edu) and search for "Employee Center"
2. Select the **Employee Center** task and log in using your IU credentials
3. Select the **Open Enrollment** tile
4. Review the *Welcome* screen then select **Next** to proceed to the *Benefits Enrollment* screen
5. Select each benefit tile one at a time to review your election, enroll, or make plan changes. When you're done selecting your coverage, dependents, and/or beneficiaries for each plan, select the **Done** button in the upper right-hand corner of the screen to return to the *Benefits Enrollment* screen.

 **Benefits with this icon require you to take action each year to participate. If you do not actively enroll or select a contribution amount for these benefits, you will not be enrolled in 2025.**

- **Medical:** You can add, change, or drop coverage as well as dependents.
    -  **Tobacco-free medical premium reduction:** You must sign the affidavit at the top of the Medical enrollment page, or complete the free university-approved tobacco cessation program each year to get the premium reduction.
  - **Health savings account:** If you enroll in the Anthem high deductible health plan (HDHP), review and update your annual HSA election.
  - **Dental:** You can add, change, or drop coverage as well as dependents.
  - **Flexible spending accounts:**
    -  **Healthcare FSA:** Enter your annual Healthcare FSA pledge. You must re-enroll in this account each year to participate.
    -  **Dependent Care FSA:** Enter your annual Dependent Care FSA pledge. You must re-enroll in this account each year to participate.
  - **Supplemental AD&D insurance:** You can add, change, or drop coverage
  - **Critical illness insurance:** You can add, change, or drop coverage for yourself and your spouse.
  - **Long-term disability insurance:** You can add or increase coverage for 2025 without providing proof of good health. Outside of this special enrollment period, medical underwriting will be required.
6. Once you've made all of your elections, select the **Submit** button pinned to the bottom of the screen.
  7. A submission verification will immediately appear on the screen. Select **View** to review your submission, or **Done** to complete online enrollment.
  8. Check your IU email account within 24 - 48 hours for a confirmation that your elections were accepted and processed by IU Human Resources. If you do not receive this email within 48 hours, your changes were not submitted properly.





## Live webinar and Q&A sessions

Join experts from the IU Benefits team and IU's benefit vendors to learn more about your 2025 coverage options and how to enroll, and get your questions answered.

Each webinar will include an online presentation and a live Q&A session. You can register for the session(s) you wish to attend by following the links below.

All times listed are Eastern Time (ET)

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
27 OCT	28	29 Open Enrollment 2025 Overview 9:30 – 10:30 a.m. <a href="#">Register</a>  Health Savings Accounts 2 – 3 p.m. <a href="#">Register</a>	30	31 Medical Coverage 9:30 – 10:30 a.m. <a href="#">Register</a>  Long-Term Disability Noon – 1 p.m. <a href="#">Register</a>	1 NOV Open Enrollment 2025 Overview Noon – 1 p.m. <a href="#">Register</a>  Healthcare & Dependent Care FSAs 2 – 3 p.m. <a href="#">Register</a>	2
3	4 Open Enrollment 2025 Overview 9 – 10 a.m. <a href="#">Register</a> Healthy IU Noon – 1 p.m. <a href="#">Register</a> Dental Coverage 2:30 – 3:30 p.m. <a href="#">Register</a>	5 Critical Illness Insurance Noon – 1 p.m. <a href="#">Register</a>  Diabetes & Hypertension Mgmt. Programs 2 – 3 p.m. <a href="#">Register</a>	6 Supplemental AD&D Noon – 1 p.m. <a href="#">Register</a>  Care.com 2:30 – 3:30 p.m. <a href="#">Register</a>	7 SupportLine EAP Noon – 1 p.m. <a href="#">Register</a>  Weight Watchers 2 – 3 p.m. <a href="#">Register</a>	8 Marathon Health Employee Health Centers Noon – 1 p.m. <a href="#">Register</a>  Open Enrollment 2025 Overview 3 – 4 p.m. <a href="#">Register</a>	9
10	11	12 Open Enrollment 2025 Overview Noon – 1 p.m. <a href="#">Register</a>	13	14	15	16

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNTS

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

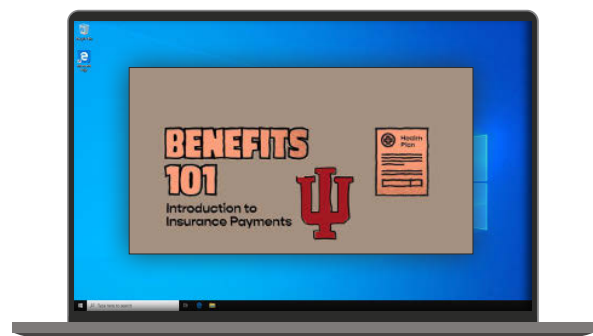
## On-demand videos

### Unable to attend one of the live sessions?

Visit the Open Enrollment website to watch an on-demand recording covering the same topics and information as the live webinars.

Additional videos are also available to teach you the basics about benefits-related topics including:

- Anthem's Sydney Health app
- Long-term disability insurance
- Critical illness insurance
- Intro to insurance payments
- Health savings accounts
- Employee assistance programs



[Watch on-demand videos.](#)

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT





## Eligibility and enrollment

### Eligibility guidelines

If you're a full-time (75% FTE or greater) appointed academic or staff employee, you're eligible to enroll in IU medical and dental coverage. You can also enroll certain family members on your plans, including:

- your legal spouse;
- your children up to the end of the month that they turn age 26 (this includes your biological, adopted, stepchildren, and children for which you have a legal guardianship); and
- your children of any age who qualify for [disabled child eligibility](#).

### Considerations for families with multiple IU employees

If you and other members of your family, such as your spouse or children, are eligible for IU benefits, there are additional considerations when enrolling in coverage.

**No dual coverage.** You and your family members can each only be covered by one IU medical and dental plan. This means that you cannot be enrolled:

- as the employee on more than one plan, or
- as both an employee and a dependent, or
- as a dependent of more than one employee.

**Enrollment under the higher compensated spouse.** If you and your spouse wish to enroll in medical and dental coverage, you must choose one of the following options:

1. Enroll as 'employee only' or 'employee with children' in separate plans.
2. Enroll as 'employee with spouse' or 'family' in the higher compensated spouse's health plan.

### Newborn eligibility

If you're enrolled in an IU medical plan, and you or your spouse has a baby, the newborn is automatically covered for the first 31 days. To continue coverage the child must be enrolled in an IU-sponsored health plan within 30 days of their birth. [Learn how to add a new child](#).

### Mid-year benefit changes (IRS-defined qualifying life events)

Open Enrollment elections must remain in place for the entire year unless you experience an IRS-defined qualifying life event such as marriage, the birth of a child, or loss of other coverage. These events allow you to make a corresponding change to your benefits as long as you request the change within 30 days of the event. [Learn more about life events](#).

## Choosing a medical plan

The following section highlights similarities and differences between IU's plan options.

### Medical plan similarities

- No pre-existing condition limits or waiting periods.
- In-network [preventive medical services are covered at 100%](#). These services may include:
  - Routine and periodic wellness exams.
  - Routine immunizations for adults and children.
  - Screening tests such as colonoscopies, mammograms, bone density testing, cancer screenings, and cholesterol labs.
  - Reproductive health services including oral contraceptives, IUDs, hormone implants, injections, emergency contraception, and sterilization.
  - Pediatric fluoride, low dose aspirin, and tobacco cessation products (up to limits).
- Both plans include access to the Marathon Health employee health centers ([learn more on page 12](#)).
- Both plans offer a travel benefit for covered medical services that aren't available within 100 miles of your home.
- Services are comprehensive and include medical, prescription, behavioral health, transplants, durable medical equipment, home health care, skilled nursing, therapy, and chiropractic services.
- Both plans have a nationwide and overseas network of providers, and offer out-of-network benefits.
- Both plans cover vision and vision wear services.
- Both plans have annual out-of-pocket maximums to protect you from catastrophic costs. Once the maximum is met, each plan pays 100% for in-network covered services for the remainder of the year.
- Neither plan has a lifetime maximum benefit on medical services.

### Medical plan differences

- **Premiums.** The higher the deductible, the lower the monthly premiums.
- **Deductibles, prescription benefits.** The deductibles and prescription benefits work differently.
- **Out-of-pocket expenses/maximums.** Deductibles, coinsurance, and copays vary in structure and amounts.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Choosing a medical plan (continued)

- **Health savings account (HSA).** A unique tax-advantaged savings account that is only available to employees enrolled in the HDHP.

### Understanding in- vs. out-of-network

Using in-network providers is key to receiving the highest level of benefits. Services from a provider that is not in the plan's network are "out-of-network," except for ER visits or urgent care while away from home.

#### IN-NETWORK

- The plans cover a higher percentage of the cost, resulting in you having lower out-of-pocket costs.
- Lower out-of-pocket maximums.
- You are not responsible for charges above the plan's allowed amounts.
- Preventive services are paid at 100%.
- Services requiring pre-approval are authorized in advance.
- Claims are typically processed faster since Anthem has established relationships with these providers.

#### OUT-OF-NETWORK

- The plan covers a lower percentage of costs, resulting in higher out-of-pocket expenses for you.
- Out-of-network deductibles, coinsurance, and out-of-pocket maximums are separate from in-network.
- You are responsible for charges above the plan's allowed amounts, which can be significant.
- Preventive services are not paid at 100%.
- Out-of-network providers are not required to authorize services in advance. You may have to request authorization or risk being responsible for additional charges.

### How the deductibles work

#### HIGH DEDUCTIBLE HEALTH PLANS (HDHP)

##### Anthem PPO HDHP

If you're enrolled in employee-only coverage, the money you spend on covered services applies toward your personal deductible. Once it's met, the plan will begin paying its share of the cost for covered services.

If you cover family members, as medical expenses are incurred, the amount each family member pays toward these expenses is credited to the family maximum. When the expenses from one or more family members add up to the family deductible, the plan will begin paying its share of the cost for covered services for all of your family members.

##### What counts towards this plan's deductible?

All covered services apply to the deductible except in-network preventive services and prescriptions.

#### TRADITIONAL DEDUCTIBLE PLANS

##### Anthem PPO \$500 Deductible Plan

For this type of plan, each family member has an individual deductible and there's also a family maximum, which is the total of all the individual deductibles. As medical expenses are incurred, the amount each family member pays toward these expenses is credited to their individual deductible and to the family maximum.

The plan will begin to pay its share of the cost of covered services after one of two things happens:

- If a family member meets their individual deductible, the plan begins to pay its share of the cost of healthcare expenses for that individual only—not for the other family members.
- If the family maximum is met, the plan begins to pay its share of the cost of healthcare expenses for all members of the family whether or not they've met their own individual deductibles.

Members cannot contribute more than the amount of their individual deductible to the family maximum.

##### What counts towards this plan's deductible?

All covered services apply to the deductible except emergency room and urgent care copays, preventive care, prescription drugs (except drugs administered in a physician's office), and transplants.

### Prescription drug coverage

Prescription drug coverage is included with your IU medical plan. Coverage includes generic, preferred brand, non-preferred brand, and specialty medications. There are specific copays and coinsurance amounts based on the medication's tier and where you fill your prescription.

CVS Caremark administers retail and mail order prescriptions, and, beginning in 2025, Archimedes will administer and fill all specialty medications.

#### CVS Caremark (retail and mail order)

You have two options to fill non-specialty prescriptions:

1. Fill up to a 30-day supply through any network retail pharmacy. Use the [Pharmacy Locator tool](#) to find a participating network pharmacy.
2. Fill up to a 90-day supply of maintenance medications through the CVS Caremark mail order pharmacy or any network retail pharmacy.

#### SAVINGS OPPORTUNITIES

To reduce your prescription costs, you can take advantage of these savings opportunities:

- **No-cost preventive medications.** Request medications on the no-cost [preventive drug list](#).
- **Request generics.** Use generic alternatives whenever possible.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNTS

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

- **Automatic GoodRx pricing.** IU members have access to GoodRx pricing on certain generic medications. Just present your Anthem ID card at a network pharmacy and the program automatically compares the covered benefit price with the GoodRx price, and charges you the lower of the two.

**NEW FOR 2025** Archimedes (specialty)

Specialty drugs are high-cost medications for chronic or complex conditions that require special handling, administration or monitoring. Beginning in 2025, the university is partnering with Archimedes to administer these medications for IU medical plan members.

Archimedes' high-touch customer service model assists patients who are taking these medications, providing a better experience and reducing issues related to home delivery. The program includes:

- **Medication Delivery:** Except in rare cases, your medication will be filled by AcariaHealth, who provides home delivery services for specialty drugs, timely refills when you need them, and 24/7 access to pharmacists and nurses.
- **Clinical Support:** Access to pharmacists with training and expertise in specialty drugs.
- **Member Services:** 24/7 telephone access to Archimedes representatives and clinicians.
- **Savings Opportunities:** Copay assistance programs to help with out-of-pocket costs.

### PRIOR AUTHORIZATIONS

Many specialty medications require prior authorization (PA) before they can be dispensed. If your specialty

medication requires a PA, Archimedes will work with CVS to transfer your existing PAs that are on file prior to December 31, 2024. These will remain in effect for the first 120 days of 2025. During this transition period, Archimedes will proactively work on updating your PA and ensure there is no disruption in filling your medications. New PAs on or after January 1, 2025, will be handled by Archimedes.

### ACCESSING COPAY ASSISTANCE

Many specialty medications have copay assistance programs where a drug manufacturer pays for all or part of the drug's cost to make it more affordable.

If a copay assistance program is available to you, but you're not currently enrolled, Archimedes will assist you with enrollment. If you do have copay assistance, Archimedes will ensure that continues and send reminders each year when it is time to re-enroll.

When you fill a prescription for a specialty drug using a copay assistance program, only the *actual amount you pay* will count towards your medical plan deductible and out-of-pocket maximum.

### CUSTOMER SERVICE

For questions, contact Archimedes at 888-330-8248 or [iuconcierge@archimedesrx.com](mailto:iuconcierge@archimedesrx.com).



## What to do if you have a specialty prescription.

### Preparing for the transition from CVS Specialty to Archimedes.

To ensure a smooth transition from CVS Specialty, Archimedes will be proactively reaching out to IU medical plan members who take specialty medications in several ways:

1. Members with a current specialty medication will receive a home mailing from Archimedes in late October that provides general information about their program and contact information.
2. An Archimedes representative will contact members directly in November to answer any questions about the benefit, copay assistance programs, or medication delivery. They will also ensure that AcariaHealth reaches out to set up your medication delivery. **If you take specialty medications but do not hear from Archimedes by December 1, 2024, please reach out to their member services center at 888-330-8248.** It is possible your phone number is not updated or accurate and Archimedes is unable to reach you.

Find answers to common questions in the [Archimedes FAQ](#). For questions or foreign language assistance, contact Archimedes Member Services at [iuconcierge@archimedesrx.com](mailto:iuconcierge@archimedesrx.com).



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Marathon Health employee health centers



IU medical plan members have access to comprehensive primary, acute (sick), and mental/behavioral health care in a convenient, affordable setting through the Marathon Health employee health centers. The Marathon Health Network consists of eight health centers across Indiana—a new center in Bloomington and seven established centers in the Indianapolis area—as well as additional locations in other states.

### Key benefits

Benefits of using Marathon Health include:

**Comprehensive care:** Access a wide range of services including primary and sick care, chronic condition management, preventive care, labs, and health coaching—all under one roof.

**Mental health counseling:** Speak with a licensed professional in-person or virtually if you're experiencing symptoms of anxiety, depression, sleep disorder, grief, stress, substance use disorder, or other mental/behavioral health conditions.

**Affordable services:** Preventive care and labs are available at no cost, while most other services, like counseling or sick visits, cost just \$35. Claims are billed through your IU medical plan and count toward your annual deductible and out-of-pocket limits, just like any other claim.

**Convenient access:** In-person and virtual appointments are available at any Marathon Health Network location—including the new [Bloomington East health center](#) and [seven established centers in Indianapolis](#)—as well as locations in other states.

### Scheduling an appointment

All services with a Marathon Health provider require an appointment. However, for acute (sick) care, every effort is made to get patients in within 48 hours. For preventive visits, appointments are typically available within 5 business days. Scheduling appointments is quick and easy using one of the following options:

- **Marathon Health app:** Schedule from your Apple or Android device.
- **Online portal:** Schedule from the [Marathon Health Patient Portal](#).
- **Toll-free number:** Call 866-434-3255 for direct assistance or to schedule mental/behavioral health visits.

## Tobacco-free premium reduction

Don't forget to re-certify your tobacco-free status during Open Enrollment.

You can reduce the monthly premium for your IU medical insurance by doing **one of the following each year**.

### 01. Sign the tobacco-free affidavit during Open Enrollment

Each year during Open Enrollment, you can sign the Tobacco-free Affidavit (located at the top of the Medical Plan enrollment screen) indicating you and/or your spouse do not use tobacco and will not in the future.

Tobacco includes any form of tobacco or nicotine products that are smoked, applied to the gums, and/or inhaled (e.g. e-cigarettes, vapes, nicotine delivery systems).

### 02. Complete the IU-approved tobacco cessation program

As an alternative to signing the Tobacco-free Affidavit, you and/or your spouse can complete the free tobacco cessation program through the **Indiana Tobacco Quitline**. Program completion is defined as completing four calls with your quit coach, then submitting a certificate of completion to IU Human Resources.

To enroll or learn more, call **1-800-QUIT-NOW** (1-800-784-8669) or text READY to 34191.

Completing the affidavit or the tobacco cessation program will reduce your monthly medical plan premium contribution by **\$7.50 per month for you or your spouse**, or **\$15 for both**. You can sign the affidavit for 2025 during online Open Enrollment—look for it at the top of the medical plan enrollment screen.





NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## 2025 medical plan premiums

For the 2025 plan year there will be an **overall 1.5% increase** in employee contributions across all salary bands and plans. The "Total monthly premium" column below includes your monthly contribution and the university's monthly contribution to the medical plan on your behalf.



The three lowest salary bands were raised again for 2025 to include more employees in the lower-cost premium groups.

Medical plan & level of coverage	Annual base salary*							Total monthly premium
	Below \$39,500	\$39,500 to \$68,999	\$69,000 to \$99,999	\$100K to \$149,999	\$150K to \$199,999	\$200K to \$249,999	\$250K & Above	
<b>ANTHEM PPO HDHP</b>								
Employee Only	\$48.54	\$64.94	\$84.52	\$106.47	\$129.23	\$157.39	\$182.66	\$493.36
Employee + Child(ren)	\$87.35	\$116.90	\$152.14	\$191.73	\$232.61	\$283.29	\$328.78	\$943.88
Employee + Spouse	\$128.62	\$172.09	\$223.98	\$282.13	\$342.47	\$417.06	\$484.04	\$1,313.97
Family	\$155.31	\$207.83	\$270.46	\$340.68	\$413.55	\$503.63	\$584.49	\$1,487.80
<b>ANTHEM PPO \$500</b>								
Employee Only	\$170.33	\$205.86	\$266.60	\$318.34	\$372.01	\$427.71	\$485.45	\$1,180.96
Employee + Child(ren)	\$306.58	\$370.57	\$479.89	\$573.02	\$669.62	\$769.87	\$873.83	\$2,243.80
Employee + Spouse	\$451.37	\$545.56	\$706.52	\$843.63	\$985.82	\$1,133.43	\$1,286.51	\$3,129.50
Family	\$545.04	\$658.76	\$853.15	\$1,018.68	\$1,190.42	\$1,368.66	\$1,553.50	\$3,542.84

\*Salary band is determined by your annual base salary at the time payroll runs each month. For full-time IU School of Medicine faculty who are dually employed by IU and IU Health or the VA, your annual base salary includes both your IU base salary and your IU Health compensation, as determined by the IU School of Medicine.

### Calculating your monthly premium

Don makes \$62,000 per year and is enrolled in the Anthem PPO HDHP with employee + spouse coverage. He completed a Tobacco-free Affidavit for himself and his spouse.

- \$ 172.09 Employee w/spouse monthly premium
- \$ 7.50 Tobacco-free Affidavit for employee
- \$ 7.50 Tobacco-free Affidavit for spouse

**\$157.09** Don pays this each month for his IU medical insurance.

### Calculating how much IU pays towards your monthly premium

The university's contribution is the difference between the "Total monthly premium" in the table above and the monthly premium that you calculated. Using the same example, here is what the university contributes each month to Don's medical premium.

- \$1,313.97 Total premium
- \$ 157.09 Monthly employee premium

**\$1,156.88** IU pays this each month toward Don's medical insurance.

**!** If you enroll in the Anthem PPO HDHP and participate in the health savings account, **the university contributes to your HSA each year you enroll—\$1,300 for employee-only coverage, and \$2,600 if you cover family members.** These tax-free funds are for you to use towards eligible health expenses and offset your out-of-pocket costs, such as your deductible and coinsurance. [Learn more about the HSA on page 16 of this guide.](#)



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## 2025 medical plans comparison

	Anthem PPO HDHP		Anthem PPO \$500 Deductible	
<b>Network availability</b>	Nationwide and Overseas			
<b>Provider network</b>	Anthem Blue Access PPO network in Indiana, Anthem National PPO (BlueCard PPO) network in other states, Anthem Blue Cross Blue Shield Global Core network overseas			
<b>HSA contributions</b> <i>(IU's contribution is deposited in two payments—half in January, and half in July)</i>	<b>IU Contribution:</b> <b>\$1,300</b> employee-only coverage <b>\$2,600</b> all other coverage levels  <b>Employee Contributions:</b> Minimum <b>\$300</b> (\$25 monthly) Maximum <b>\$4,300</b> employee-only / <b>\$8,550</b> all other levels (plus an additional \$1,000 catch-up contribution if you are age 55 or older)		Not Eligible	
<b>MEDICAL</b>	<b>IN-NETWORK</b>	<b>OUT-OF-NETWORK</b>	<b>IN-NETWORK</b>	<b>OUT-OF-NETWORK</b>
<b>Deductible</b>	<b>\$2,000</b> employee-only <b>\$4,000</b> all other levels	<b>\$4,000</b> employee-only <b>\$8,000</b> all other levels	<b>\$500</b> individual <b>\$1,500</b> family	<b>\$900</b> individual <b>\$2,700</b> family
<b>Out-of-pocket (OOP) maximum</b>	<b>\$4,000</b> employee-only <b>\$8,000</b> all other levels	<b>\$8,000</b> employee-only <b>\$16,000</b> all other levels	<b>\$2,400</b> individual <b>\$7,200</b> family	<b>\$6,850</b> individual <b>\$13,700</b> family
<b>Office visits</b>	<b>20%</b> after deductible	<b>40%</b> after deductible	<b>20%</b> after deductible	<b>40%</b> after deductible
<b>Coinsurance</b>	<b>20%</b> after deductible	<b>40%</b> after deductible	<b>20%</b> after deductible	<b>40%</b> after deductible
<b>Preventive services</b>	<b>\$0</b> no deductible	<b>40%</b> after deductible	<b>\$0</b> no deductible	<b>40%</b> after deductible
<b>Mental health &amp; substance use</b>	Covered as any other illness through Anthem Behavioral Health.			
<b>Emergency room</b>	<b>20%</b> after deductible <i>No coverage unless an emergency</i>		<b>\$150</b> copay <i>Waived if admitted</i>	
<b>Urgent care</b>	<b>20%</b> after deductible	<b>40%</b> after deductible	<b>\$75</b> copay	<b>40%</b> after deductible
<b>PRESCRIPTIONS</b>	<b>IN-NETWORK</b>	<b>OUT-OF-NETWORK</b>	<b>IN-NETWORK</b>	<b>OUT-OF-NETWORK</b>
<b>Retail</b> <i>(up to 30-day supply)</i>	<b>20%</b> after deductible	Members can submit a prescription drug claim form and receipts to CVS Caremark for partial reimbursement. These claims count towards your in-network deductible and out-of-pocket maximum.	Tier 1 – 3 <b>\$8 / \$25 / \$45</b>	<b>50%</b> plus amounts above the network's discounted price
<b>Retail</b> <i>(up to 90-day supply)</i>			Tier 1 – 3 <b>\$20 / \$62 / \$112</b>	
<b>Mail Order</b> <i>(up to 90-day supply)</i>			Tier 1 – 3 <b>\$20 / \$62 / \$112</b>	No coverage
<b>Specialty</b> <i>(up to 30-day supply)</i>			Tier 1 – 3 <b>\$20 / \$62 / \$112</b>	
<b>OOP maximum for prescriptions</b>			N/A (included with medical OOP max)	
<b>Preventive prescriptions</b>	Plans pay 100% for preventive prescriptions such as generic contraceptives, pediatric sodium fluoride and iron, aspirin, folic acid, bowel preps, statins, Metformin, generic antiretroviral therapy, breast cancer preventives. 100% coverage for tobacco cessation products & nicotine replacement. OTC products require a prescription for coverage.			
<b>VISION</b>				
<b>Eye exams &amp; eyewear</b>	Routine eye exam (\$10 copay) and eyewear (frames, lenses, contacts) at specific allowances through Anthem Blue View Vision.			





NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Plan highlights

You can elect dental coverage with or without electing medical coverage. This also means that eligible dependents who are not enrolled in medical coverage may be enrolled in dental coverage as long as you are enrolled.

Members may receive dental care from any licensed dentist. However, you will receive a higher level of benefits when covered services are obtained from a Total Cigna PPO Network dentist.

## Coverage summary

### When you visit an in-network dentist:

- **Two free** routine exams/cleanings per year.
- There is an annual **\$25 deductible** (does not apply to preventive care).
- Other services are **covered at 50%** up to the annual benefit limit.

### When you visit an out-of-network dentist:

- Two routine exams/cleanings per year are covered at 100% of allowed charges.
- There is an annual \$25 deductible.
- Other services are covered at 50% up to the annual benefit limit.
- The member is responsible for amounts above allowed charges.

## Annual benefit limit

The IU Dental Plan has an initial annual benefit limit of \$1,200 per covered member. For each member who receives at least one preventive cleaning/exam per calendar year, the annual benefit limit will increase by \$100 in the subsequent year, up to a maximum of \$1,500. Child orthodontia is covered up to a \$1,000 lifetime limit.

### ANNUAL BENEFIT LIMIT EXAMPLE:

YEAR	BENEFIT LIMIT	PREVENTIVE CARE
1st Year	<b>\$1,200 (base)</b>	1 cleaning
2nd Year	<b>\$1,300</b>	1 cleaning
3rd Year	<b>\$1,400</b>	No cleaning
4th Year	<b>\$1,400</b>	1 cleaning
5th Year	<b>\$1,500 (max)</b>	1 cleaning

## Exclusions & limitations

- Some services are excluded from coverage (e.g. cosmetic procedures).
- There are limits on the number and frequency of some services (e.g. the number of routine cleanings is limited to two per year).
- Some services are limited by age (e.g. orthodontia is limited to children age 18 or under).

## 2025 dental plan premiums

For the 2025 plan year there will be no increase to employee contributions. The "Total Monthly Premium" column below includes your monthly contribution and the university's monthly contribution to the dental plan on your behalf.



**All three dental plan salary bands were raised for 2025 to include more employees in the lower-cost premium groups.**

Level of coverage	Annual base salary*			Total monthly premium
	Below \$39,500	\$39,500 to \$68,999	\$69,000 & Above	
<b>CIGNA DENTAL</b>				
Employee only	\$8.88	\$11.14	\$13.24	\$41.86
Employee + child(ren)	\$16.00	\$20.09	\$23.81	\$75.39
Employee + spouse	\$20.87	\$26.22	\$31.06	\$98.34
Family	\$30.42	\$38.22	\$45.30	\$143.43

\*Salary band is determined by your annual base salary at the time payroll runs each month. For full-time IU School of Medicine faculty who are dually employed by IU and IU Health or the VA, your annual base salary includes both your IU base salary and your IU Health compensation, as determined by the IU School of Medicine.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Plan highlights

The HSA is a tax-advantaged savings account that can be used to pay for IRS-qualified health expenses for you, your spouse, and your tax dependent children. After you open an HSA, you can use the funds to pay for medical, dental, and vision plan deductibles and coinsurance, office visits, prescriptions, over-the-counter items, and much more.

HSAs can also be used as for long-term savings. Your full account balance rolls over each year and accrues interest tax-free, and funds above a \$1,000 balance in your cash account can be invested. Your account and the funds in it are also yours to keep, even if you leave IU or retire.

## HSA eligibility

To be eligible for tax-free HSA contributions, you must meet the following IRS-defined eligibility requirements:

1. You are covered under a qualified high deductible health plan (including the Anthem PPO HDHP),
2. You have a valid Social Security Number,
3. You are not listed as a dependent on anyone's tax return,
4. You do not have medical coverage other than a qualified HDHP, including Tricare (if you have VA benefits, receiving preventive care services or treatment for a service-related disability from the VA does not disqualify an individual from participating in an HSA), and
5. You are **not enrolled in Medicare** (enrollment in any part of Medicare makes you ineligible to make or receive tax-free contributions to an HSA).

Your spouse can have other medical coverage, but you cannot be covered on your spouse's non-HDHP medical plan, HRA, or unrestricted healthcare FSA and still be eligible to make tax-free HSA contributions.

If you're ineligible for tax-free contributions, you can still enroll in an HDHP and waive the HSA. If you do enroll in the HSA, you are responsible for removing any ineligible or excess contributions from your account in the same tax year they are made (i.e. before December 31 of that year), and for reporting them as taxable income on your annual tax return.

## Eligible HSA expenses

The HSA can be used tax-free for health expenses incurred by you, your spouse, or your IRS-qualified tax dependents, even if they are not covered on your HDHP. Examples of eligible expenses include:

- medical, dental, vision deductibles/coinsurance
- prescriptions
- medical equipment and supplies
- acupuncture
- disability aids and hearing aids
- travel to and from medical services

[View the full list of eligible expenses.](#)

## Accessing your HSA funds

Once HSA contributions are made, funds can be accessed in several different ways:

**IU Benefit Card.** All HSA participants automatically receive an IU Benefit Card—a debit-type Visa card that allows you to pay for purchases and services from your HSA, [healthcare FSA](#), or both. The card is effective for three years, and new cards are automatically reissued as they expire.

**Online.** Log in to your account at [benefit-info.com/iu](#) and use the 'Send Payment' feature to pay a healthcare provider online or the 'File Claim/Reimburse Self' feature to reimburse yourself for eligible expenses you pay out-of-pocket.



## Medicare and your HSA

If you're at or near age 65 and enrolled in IU health insurance, it's important to understand how Medicare enrollment affects your HSA eligibility.

### You don't have to enroll in Medicare Part A just because you turn age 65.

Many people believe they're required to enroll in Medicare Part A at age 65. However, this isn't the case. In fact, it could be detrimental if you're making contributions to an HSA. As long as you're enrolled in a "creditable" group health plan (like an IU employee medical plan) you can delay Medicare enrollment without penalty.

**However, once you do enroll in Medicare, you're no longer eligible to make or receive tax-free HSA contributions and you're responsible for taxes and penalties assessed on ineligible contributions.**

Any contributions made by you or the university once you've enrolled in Medicare are considered ineligible, and potentially subject to penalties and taxes. Additionally, your Medicare coverage can be backdated up to six months, potentially resulting in up to six months of retroactive ineligible contributions.

If you're already enrolled in Medicare, or are thinking about enrolling soon, learn about your options by visiting IU's [Medicare & HSA web page](#) or by contacting AskHR at [askhr@iu.edu](mailto:askhr@iu.edu).



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Contributions to your HSA

**IU's contribution.** The university makes bi-annual contributions to your account each year you're enrolled totaling **\$1,300** for employee-only coverage or **\$2,600** if you cover family members.

**Your contributions.** You are required to make a minimum annual contribution of **\$300**, and can make additional contributions up to the IRS limit (see tables below). Your annual contribution is divided equally and deposited to your account with each payroll deduction.

The maximum amount you can contribute can be affected by your spouse's HSA contributions or Archer MSA contributions. Additionally, if you're enrolled in the HDHP for less than a full year, your maximum is prorated based on the number of months you're covered.

Details about these provisions can be found in [IRS Publication 969, Health Savings Accounts and Other Tax-Favored Health Plans](#).

## Coordinating your HSA with your spouse

If you and your spouse both have an HSA, it's important to coordinate your enrollments and contributions.

- If you and your spouse are **each enrolled separately** in your own employee-only HDHP coverage, each of you are subject to the employee-only HSA contribution limit (\$4,300 each).
- If either you or your spouse **cover family members** on your HDHP (employee with children or family coverage), then together you are subject to the family HSA contribution limit (\$8,550). In other words, your total combined contributions to both HSAs cannot exceed \$8,550.
- If you are **age 55 or older by the end of the tax year**, you can contribute an extra \$1,000 to your HSA each year (make a "catch-up contribution"). If you and your spouse qualify for catch-up contributions, you can each contribute the extra \$1,000, but the funds must be deposited to your individual HSAs—not a shared account.

## 2025 HSA contribution limits

Each year, the IRS sets annual contribution limits for HSAs. For 2025, that limit is **\$4,300** for employee only coverage, and **\$8,550** for all other coverage levels. When determining how much you can contribute, you need to take IU's contribution, and your eligibility for the catch-up contributions, into consideration.

### IF YOU'RE UNDER AGE 55...

The maximum amount you can contribute is the IRS limit minus IU's contribution.

	IRS limit:	IU contributes:	You can contribute up to:
<b>Anthem PPO HDHP</b>			
<b>Employee only</b>	\$4,300	\$1,300	<b>\$3,000</b>
<b>All other levels</b>	\$8,550	\$2,600	<b>\$5,950</b>

### IF YOU'RE AGE 55 & UP...

The maximum amount you can contribute is the IRS limit minus IU's contribution, plus an additional \$1,000 catch-up contribution.

	IRS limit:	IU contributes:	You can contribute up to:	Plus the \$1,000 catch-up, for a total of:
<b>Anthem PPO HDHP</b>				
<b>Employee only</b>	\$4,300	\$1,300	\$3,000	<b>\$4,000</b>
<b>All other levels</b>	\$8,550	\$2,600	\$5,950	<b>\$6,950</b>





NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Healthcare FSA

### Plan highlights

The healthcare FSA is a voluntary plan that lets you set aside tax-free funds for IRS-eligible medical, dental, and vision expenses for you, your spouse, and your children until they turn age 26, even if they're not covered on your medical plan, if they're married, or if they're living away from home.

Each year during Open Enrollment, you must re-enroll and decide how much to contribute for the year. **For 2025, the maximum amount you can contribute is \$3,200.** According to IRS rules, your contribution pledge has to stay in place for the entire year, and cannot be changed unless you experience an IRS-defined qualifying life event, such as getting married or having a child.

A key benefit of this account is that your full annual contribution is available for reimbursement on day one of the plan year, January 1. You "pay the account back" over the course of the year through payroll deductions.

Special rules and restrictions apply when you or your spouse are enrolled in both a health savings account and a healthcare FSA. [See the next page for details.](#)

### Eligible healthcare expenses

Funds in your account can only be used for IRS-eligible health expenses you incur during the tax year (between January 1 and December 31) and must be submitted for reimbursement by February 28 of the following year.

#### Examples of eligible expenses include:

- amounts you pay out-of-pocket towards your non-HDHP deductible
- coinsurance and copays
- prescriptions
- over-the-counter medicines (e.g., cold/pain meds)
- menstrual products
- hearing aids and related expenses
- dental care and orthodontia
- transportation costs to/from medical services
- vision exams, eyewear, or vision surgery

Examples of expenses that are **not eligible** include:

- amounts you pay out-of-pocket towards your HDHP deductible
- personal care items like toothpaste or deodorant
- over-the-counter vitamins and supplements
- cosmetic procedures
- teeth whitening services/products

[View the full list of eligible expenses.](#)

### Accessing your funds

Before you can access the funds in your account, you first have to authorize the plan administrator, WEX, to direct deposit your reimbursements by logging in to the [WEX website](#). There are then two ways to use the funds in your account. Claims for reimbursement must be submitted no later than February 28 of the following year.

1. Pay for eligible expenses out-of-pocket then submit claims for reimbursement by logging in to [WEX website](#). You must include supporting documents, such as a receipt for payment from your provider.
2. Use the IU Benefit Card at the time of service or purchase. All healthcare FSA participants automatically receive an IU Benefit Card—a debit-type Visa card that allows you to pay for purchases and services from the IU-sponsored healthcare FSA and health savings account. The card is effective for three years, and new cards are automatically reissued as they expire.

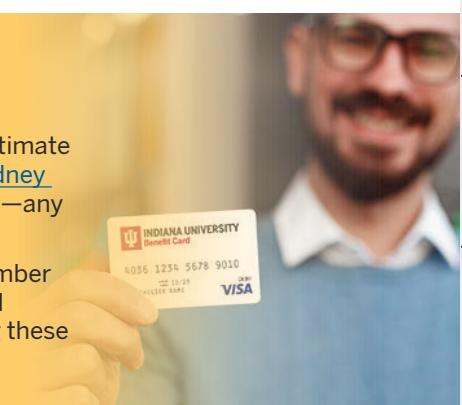
### Unused funds at the end of the year

Flexible spending accounts are subject to the IRS "use it or lose it" rule. This means that unused funds in the account are forfeited each year. For the healthcare FSA, up to \$640 of unused funds automatically roll into the next year, reducing the "use it or lose it" aspect. However, unused funds above this carryover limit are still forfeited after the claims deadline, February 28.

## How much should I pledge to my healthcare FSA?

When deciding how much to contribute for the year, a review of your recent health expenses can give you an idea of costs you might expect. To help you review and estimate your personalized medical and prescription costs, register or log in to [Anthem's Sydney Health app](#). Don't put money in your account for anything but predictable expenses—any unused funds above the carryover limit after the claims filing deadline are forfeited.

Additionally, if you're also planning on enrolling in the health savings account, remember that you can only use your healthcare FSA funds for dental and vision expenses until you've met your HDHP deductible for the year. Additional details about coordinating these accounts is on the next page.







NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Enrolling in the healthcare FSA and HSA

### Rules when you have both accounts

If you have both a healthcare FSA and an HSA, there are rules for coordinating your accounts:

- You can use your HSA funds for any eligible health expenses, as usual.
- Your healthcare FSA can only be used for dental and vision expenses until you've met your high-deductible health plan (HDHP) deductible.
- Once you've met your deductible and provided proof to WEX, you can start using your healthcare FSA for medical and prescription expenses incurred from that point forward.

For additional information on the coordination of these two accounts, review [IRS Publication 969](#).

### Accessing your funds with both accounts

If you have both a healthcare FSA and an HSA, here's how your IU Benefit Card works:

- When you use your card at a medical provider or pharmacy, the funds will be drawn from your HSA
- When used at a dental or vision provider, the funds will be drawn from your healthcare FSA.
- Once you've met your deductible and provided proof to WEX, your IU Benefit Card will automatically draw all expenses from your healthcare FSA first, then from your HSA once your FSA funds are exhausted.

You also have the option to pay for expenses out-of-pocket, then submit a claim for reimbursement.

## Comparing the healthcare FSA and HSA

	Health savings account	Healthcare FSA
<b>“Use it or lose it” rule</b>	No. <b>Full balance</b> rolls over year-to-year.	Yes. However, up to <b>\$640</b> of unused funds will roll over to the next plan year—any unused funds over \$640 are forfeited.
<b>Interest bearing account</b>	Yes. Funds in your HSA earn interest, similar to a traditional savings account.	No.
<b>Investment options</b>	Yes. Funds above \$1,000 in your cash account can be invested in a variety of mutual funds.	No.
<b>Availability of funds</b>	Your annual contribution is deposited through equal payroll deductions over the course of the year. IU's contributions are deposited in two installments — half in January, half in July.	Full annual pledge available in January. You "pay your account back" through equal payroll deductions over the course of the year.
<b>Annual contribution limits</b>	Minimum: <b>\$300</b> Maximum: <b>\$4,300</b> individual / <b>\$8,550</b> family Catch-up: Additional <b>\$1,000</b> if age 55 & up	Minimum: <b>None</b> Maximum: <b>\$3,200</b>
<b>Mid-year contribution changes</b>	Change contribution at any time during the year.	Change contribution only if you experience a corresponding IRS-defined qualifying life event (e.g. marriage or birth)
<b>Use of funds</b>	Use funds for IRS-approved health expenses. You are responsible for verifying that use of funds is appropriate.  Use funds for non-health expenses after age 65 (you must pay income taxes on those funds).	Use funds for IRS-approved health expenses. WEX is responsible for verifying that use of funds is appropriate.
<b>Incurring expenses</b>	Use funds for expenses incurred as far back as the original date the account was opened.	Use funds only for expenses incurred during the plan year (January – December).
<b>Using funds for family members</b>	Use funds for your legal spouse and IRS tax dependents (i.e. qualified children under age 19, or age 24 and going to school full-time).	Use funds for your legal spouse and children through age 25, even those who are married or living away from home.
<b>Portability</b>	Your HSA is your account, even when you leave IU or retire.	Participation in the FSA ends when you leave your job at IU or retire.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Dependent care FSA

### Plan highlights

The dependent care FSA is a voluntary plan that allows you to set aside tax-free funds from your paycheck to pay for day or evening care expenses for your eligible dependents so you and your spouse can work.

Each year during Open Enrollment, you must re-enroll in the plan and decide how much to contribute for the year. **For 2025, the maximum amount you can contribute is \$5,000 per household.** You and your spouse can each enroll in the plan, but your combined elections cannot exceed \$5,000 (or \$2,500 each for married employees who file their income taxes separately).

According to IRS rules, your contribution pledge has to stay in place for the entire year, and cannot be changed unless you experience an IRS-defined qualifying life event, such as getting married or having a child.

Unused funds in your account after the April 15 claims deadline are forfeited per IRS regulations. They cannot be "rolled over" beyond the plan year, and cannot be moved between accounts.

### Eligible expenses

Funds in your account can only be used for IRS-eligible care expenses you incur between January 1 and March 15 of the following year, and must be submitted for reimbursement by April 15 of the following year. You cannot be reimbursed for services before they happen, even if you have to pay the provider in advance.

Care expenses must be for one the following dependents to be considered eligible:

- **Children** – your tax dependents under age 13.
- **Spouse** – your legal spouse who is physically or mentally unable to care for themselves.
- **Elders/Adults** – your tax dependents who are physically or mentally unable to care for themselves.

### Examples of eligible care expenses include:

- Nursery school, preschool, or programs for children below kindergarten level
- Before- or after-school care for a child at kindergarten level or above
- Summer day camp during working hours
- Household employee whose services include the care of a qualifying person
- Application or registration fees, deposits, and fees paid to reserve a spot in a daycare center

### Examples of expenses that are **not eligible** include:

- Care that has not yet occurred
- Kindergarten or private school tuition
- Overnight camp
- Summer school or tutoring programs

### Accessing your funds

Before you can access the funds in your account, you first have to authorize the plan administrator, WEX, to direct deposit your reimbursements by logging in to the [WEX website](#).

When you incur eligible expenses, you must pay for them out-of-pocket then submit claims for reimbursement by logging in to the [WEX website](#). You must include supporting documents with your claim, such as a receipt for payment from your care provider. Claims for reimbursement must be submitted no later than April 15 of the following year.

It's important to note that **even if your account balance is less than your claim, you can still file the claim.** When it's approved, you will be reimbursed as the funds become available in your account.

- For example, if you submit a claim for \$500 and your account balance is \$200, WEX will reimburse the \$200 available in your account, and your balance will be reflected as negative \$300. As additional funds are deposited into your account, WEX will automatically reimburse you for the remaining amount.

### How much should I pledge to my dependent care FSA?

**Estimate your annual care expenses.** Use past expenses to help calculate the total amount you expect to spend on care during the year.

**Account for any upcoming changes.** Think about upcoming changes, such as a child starting school, that could change your care needs.

**Avoid overestimating.** Because the funds are subject to the "use-it-or-lose-it" rule, pledge only what you're confident you'll spend within the year.

**Still unsure?** Check out the [Dependent Care Worksheet](#) to help calculate your annual contribution.







NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Plan highlights

Supplemental accidental death and dismemberment (AD&D) insurance is a voluntary plan that pays you or your beneficiaries a benefit in the event of death or dismemberment following a covered accident.

Coverage is provided to members 24 hours a day, 365 days a year, for injuries caused by accidents that occur on or off the job, at home, or while traveling.

## Eligibility

Coverage is available for you, your legal spouse, and your dependent children through age 25. Coverage for totally disabled dependents may continue past the age limit.

## Plan benefits

This plan provides benefits if an accident results in:

- Death or dismemberment or loss of sight, speech, or hearing caused by an accident
- Paraplegia, quadriplegia, or hemiplegia
- Coma lasting more than 30 days
- Permanent and total disability caused by an accident

The benefit amount is a percentage of the AD&D coverage in effect on the date of the accident and is determined by the loss suffered. Examples of the benefit percentage payable include:

- Loss of life = 100%
- Loss of one hand or foot = 50%
- Loss of sight in one eye = 50%
- Loss of speech = 50%
- Loss of hearing in both ears = 50%

Specific percentages payable and any stipulations can be found in the [Supplemental AD&D Plan Booklet](#).

## Additional benefits

When an AD&D benefit is payable, additional benefits may be available including:

- Higher education costs for your surviving children
- Career adjustment benefits for your surviving spouse
- Additional benefit if an insured member passes away due to an automobile accident and was

wearing a seat belt or if their air bag deploys

- Child care benefit to allow your surviving spouse to work or obtain training for work
- Repatriation if you pass away more than 200 miles from home
- Additional line of duty benefits for public safety officers

Specific benefit details can be found in the [Supplemental AD&D Plan Booklet](#).

## Coverage amounts

You can elect employee only or family coverage, with a benefit of \$30,000 to \$500,000.

The benefit amount for each of your dependents is:

- **Spouse only**—60% of your coverage
- **Children only**—20% of your coverage for each child, not to exceed \$50,000
- **Spouse and children**—50% of your coverage for your spouse and 15% of your coverage for each child

## 2025 supplemental AD&D premiums

You cover the full cost of premiums for this plan, which are made through after-tax payroll deductions.

Benefit amount*	Employee-only coverage	Family coverage
\$30,000	\$0.42	\$0.72
\$60,000	\$0.84	\$1.44
\$90,000	\$1.26	\$2.16
\$120,000	\$1.68	\$2.88
\$180,000	\$2.52	\$4.32
\$240,000	\$3.36	\$5.76
\$300,000	\$4.20	\$7.20
\$350,000	\$4.90	\$8.40
\$400,000	\$5.60	\$9.60
\$450,000	\$6.30	\$10.80
\$500,000	\$7.00	\$12.00



**Remember to review and update your Supplemental AD&D beneficiaries.**

**Did you know that beneficiary designations take precedence over any other form of legal documentation, including your will?**

If your beneficiaries are outdated, your benefits could end up in the wrong hands, leaving your unnamed beneficiary with little legal recourse, if any. Even if you're keeping the same level of supplemental AD&D coverage, you should still review your beneficiaries during Open Enrollment and update them if needed.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Plan highlights

Voluntary critical illness insurance from The Standard pays you a lump sum in the event that you, your covered spouse, or your dependent children are diagnosed with a serious illnesses or medical condition covered by the policy.

Premiums are paid on an after-tax basis through payroll deductions, making any benefits paid out to you tax-free. If you qualify for a payout from the policy, it is paid directly to you in a lump sum, and can be used for whatever you need most as you recover—for personal expenses such as medical plan deductibles, coinsurance, groceries, or rent; to replace lost income; or to cover any other financial obligations that may come up. There are no requirements as to how the funds must be spent.

Enrolling in this coverage also makes you and your covered family members eligible for an annual \$100 incentive for receiving a covered preventive screening.

## Eligibility & enrollment

Coverage is available for you, your legal spouse, and your dependent children through age 25. Coverage for totally disabled dependents may continue past the age limit.

Enrollment in this plan is only available during Open Enrollment or within 30 days of hire or an [IRS-qualifying life event](#). You must enroll yourself to enroll your spouse. If your spouse is also a benefit-eligible IU employee, you cannot enroll each other as spouses. Instead, you must each enroll in the employee-only coverage option. Your children are automatically enrolled at 50% of your benefit amount when you enroll in the plan.

## Coverage amounts

Coverage is available in the following amounts:

- **Employee** — \$10,000 to \$50,000 in increments of \$10,000
- **Spouse** — \$5,000 to \$25,000 in increments of \$5,000 (cannot exceed 50% of your benefit)
- **Children through age 25** — Automatically covered at 50% of your coverage with no additional cost.



## Covered medical conditions

To receive benefits from the policy, you or your covered spouse or child must be diagnosed with one of the following named conditions after your coverage starts.

### COVERED CONDITIONS FOR ADULTS

Receive **100%** of your coverage amount following a diagnosis of:

- Heart attack
- Stroke
- Cancer
- End-stage renal failure
- Major organ failure
- Coma
- Paralysis
- Loss of sight
- Occupational hepatitis
- Occupational HIV
- Amyotrophic lateral sclerosis (ALS)
- Advanced alzheimer's disease
- Advanced multiple sclerosis
- Advanced parkinson's disease
- Benign brain tumor
- Bone marrow transplant
- Loss of hearing
- Loss of speech

Receive **25%** of your coverage amount following a diagnosis of:

- Severe coronary artery disease with recommendation of bypass surgery
- Carcinoma in situ

### COVERED CONDITIONS FOR CHILDREN

Your eligible children are covered for these childhood illnesses in addition to the 20 critical illnesses for adults:

- 20 named critical illnesses for adults
- Anal atresia
- Anencephaly
- Biliary atresia
- Cerebral palsy
- Cleft lip
- Cleft palate
- Club foot
- Coarctation of the aorta
- Cystic fibrosis
- Diaphragmatic hernia
- Down's syndrome
- Gastroschisis
- Hirschsprung's disease
- Hypoplastic left heart syndrome
- Infantile hypertrophic pyloric stenosis
- Muscular dystrophy
- Omphalocele
- Patent ductus arteriosis
- Spina bifida
- Custica with myelomeningocele
- Tetralogy of fallot
- Transposition of the great arteries



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## \$100 health maintenance screening

Each year you're enrolled in critical illness insurance, you and your covered family members are each eligible to receive a \$100 tax-free cash incentive for receiving one of the following covered health screenings:

- Abdominal aortic aneurysm ultrasound
- Ankle brachial index (ABI) screening for peripheral vascular disease
- Biopsies for cancer
- Bone density screening
- Breast ultrasound
- Cancer antigen (CA 125) blood test for ovarian cancer
- Cancer antigen (CA 15-3) for breast cancer
- Carcinoembryonic antigen (CEA) blood test for colon cancer
- Colonoscopy
- Complete blood count (CBC)

- Comprehensive metabolic panel (CMP)
- COVID-19 testing and antibody testing for COVID-19
- Electrocardiogram (EKG)
- Hemocult stool analysis
- Hemoglobin A1C
- Human papillomavirus (HPV) vaccination
- Lipid panel
- Mammography
- Mental health assessment
- Pap smears or thin prep pap test
- Prostate specific (PSA) test
- Stress test on a bicycle or treadmill

The screening must be received during the plan year (January 1 – December 31) to qualify for the incentive. Following the screening, simply submit a claim online by logging in to [The Standard's website](#).



## Get a \$100 cash incentive for attending your annual physical.

Regular health checkups, preventive exams, and screening tests are vital for your well-being and instrumental in discovering health issues before they become severe. Each year, you and your covered family members can receive a \$100 cash incentive when you have a preventive exam, lab, or screening done. The best part? Most of these preventive screenings and tests are **covered at no cost** if you have IU-sponsored medical insurance.

## Critical illness insurance premiums

Premiums for this coverage are paid through after-tax payroll deductions. This policy uses an "attained age" pricing structure, meaning that when you enroll, the monthly premium for you and your spouse is calculated based on your age at the time of purchasing the policy. However, **your premium is not fixed—it's recalculated each year** and increases as you move into the next age bracket.

Benefit amount	Employee monthly contribution					
	Age 18 – 29	Age 30 – 39	Age 40 – 49	Age 50 – 59	Age 60 – 69	Age 70 & Up
<b>EMPLOYEE COVERAGE<sup>1</sup></b>						
\$10,000	\$2.10	\$3.00	\$5.70	\$11.40	\$20.70	\$52.10
\$20,000	\$4.20	\$6.00	\$11.40	\$22.80	\$41.40	\$104.20
\$30,000	\$6.30	\$9.00	\$17.10	\$34.20	\$62.10	\$156.30
\$40,000	\$8.40	\$12.00	\$22.80	\$45.60	\$82.80	\$208.40
\$50,000	\$10.50	\$15.00	\$28.50	\$57.00	\$103.50	\$260.50
<b>SPOUSE COVERAGE<sup>2</sup></b>						
\$5,000	\$1.05	\$1.50	\$2.85	\$5.70	\$10.35	\$26.05
\$10,000	\$2.10	\$3.00	\$5.70	\$11.40	\$20.70	\$52.10
\$15,000	\$3.15	\$4.50	\$8.55	\$17.10	\$31.05	\$78.15
\$20,000	\$4.20	\$6.00	\$11.40	\$22.80	\$41.40	\$104.20
\$25,000	\$5.25	\$7.50	\$14.25	\$28.50	\$51.75	\$130.25

<sup>1</sup> Eligible children through age 25 are automatically covered at 50% of the employee's benefit amount for no additional cost.

<sup>2</sup> Premium for spouse coverage is calculated based on the employee's age.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

### SPECIAL ENROLLMENT OPPORTUNITY

**During this year's Open Enrollment, you can enroll in long-term disability (LTD) insurance, or increase your coverage, without going through medical underwriting (i.e. providing proof of good health). If you previously applied for LTD coverage and were denied by the plan administrator, The Standard, you are not eligible to enroll during this special enrollment period.**

### Plan highlights

Voluntary LTD insurance provides a financial safety net by replacing up to 60% of your income if you're unable to work for an extended period due to a qualified disability, such as an injury, illness, mental health condition, or pregnancy. The policy covers disabilities that occur 24/7, both on and off the job. [Review the LTD plan booklet to learn more about this plan.](#)

### Eligibility & enrollment

If you're a full-time (75% FTE or greater) appointed academic or staff employee, you're eligible for this plan.

If you enroll within 30 days of your hire date, you do not have answer any health questions. Outside of your new hire enrollment period, you can enroll or increase your coverage at any time, but you'll be required to go through medical underwriting. However, during this year's Open Enrollment period, you get to skip this step as long as you were not previously denied enrollment.

This policy requires you to be "actively at work" before your insurance can begin, meaning you must be performing your regular job duties for IU. This includes being able to work on scheduled days off, holidays, or vacation days, as long as you were actively working on your last scheduled workday.

### Plan benefits

You choose if benefits will begin after 90 or 180 days of disability (your "benefit waiting period") and whether or not to add the optional annuity contribution benefit:

- Option A:** 180-day benefit waiting period
- Option B:** 90-day benefit waiting period
- Option C:** 180-day benefit waiting period with ACB
- Option D:** 90-day benefit waiting period with ACB

If you select the ACB, contributions will be made on your behalf to an annuity savings account after 24 months of disability.

### When am I considered disabled?

There is not a specific list of disabilities that are considered "qualified" under the plan. When you file an LTD claim, your doctor(s) are required to submit an attending physician statement along with supporting medical records indicating that you are unable to work. The Standard then uses this information to determine if you're eligible for benefits under the plan (i.e. if you're unable to perform your job duties due to an illness, injury,

pregnancy, or mental health condition). [Review the LTD plan certificate for details.](#)

### How much is the LTD benefit?

Your monthly LTD benefit is 60% of your budgeted base salary, up to \$10,000 per month, reduced by any deductible income (e.g. Social Security Disability, state disability income, workers' compensation). Premiums for LTD are made on an after-tax basis, making any benefits paid out to you tax-free.

### When do LTD benefits begin?

If you become disabled and your claim for LTD benefits is approved, benefits become payable after you have been continuously disabled for your selected benefit waiting period (90 or 180 days).

### How long are LTD benefits payable?

The duration of benefits is based on your age when the disability begins, as indicated on the following table:

Age when disability begins	Maximum benefit period
Under age 60	To age 65
60 - 65	5 years
66	4 years
67	3 ½ years
68	3 years
69	2 ½ years
70	2 years
71	1 ¾ years
72	1 ½ years
73	1 ¼ years
74 and older	1 year

### Estimate your monthly premium

Your monthly premium for LTD is based on your age, salary, and coverage. Premiums are paid through after-tax payroll deductions and are automatically recalculated as your age or salary changes.

### To estimate your monthly premium:

- Find your age and desired coverage option in the table below.
- Multiply your annual salary by the corresponding rate from the table.
- Divide that amount by 12.

Age	Option A	Option B	Option C	Option D
<b>Under 40</b>	.00050	.00059	.00071	.00085
<b>40 - 44</b>	.00122	.00158	.00163	.00212
<b>45 - 49</b>	.00205	.00264	.00264	.00341
<b>50 - 54</b>	.00329	.00424	.00426	.00548
<b>55 - 69</b>	.00403	.00524	.00524	.00680
<b>70 &amp; up</b>	.00604	.00778	.00784	.01012





NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

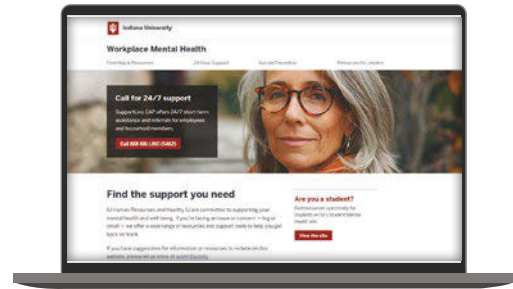
CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## IU Workplace Mental Health

[workplacementalhealth.iu.edu](http://workplacementalhealth.iu.edu)

As part of an ongoing effort to improve access to mental health care for employees, IU Human Resources and Healthy IU teamed up to develop and launch the IU Workplace Mental Health website. This site serves as a virtual hub that can guide you to benefits and services if you're experiencing a mental health concern or want to support a coworker or family member.



Here's what you can find on the site:



### 24-HOUR SUPPORT

Visit the [24-Hour Support page](#) to connect with SupportLinc, the university's employee assistance program (EAP). Their licensed care advocates can provide short-term assistance for issues such as grief and loss, work-related pressures, stress, depression, and anxiety, and can connect you with ongoing care as needed.

To connect with SupportLinc simply call 888-881-LINC (5462) or visit [SupportLinc.com](http://SupportLinc.com) and create an account using group code "iu".



### RESOURCES FOR LEADERS

Departments, managers, and supervisors can visit the [Resources for Leaders page](#) to find things such as expert resources and training related to organizational concerns or how to find support after a critical incident in the workplace.



### FIND HELP & RESOURCES

Visit the [Find help & Resources page](#) to learn how to access the wide range of mental health services available to IU employees, leaders, residents, and family members. Whether you're struggling at home or work, needing someone to talk to, or just looking for ways to improve your mental well-being, everything you need is in one place, including:

- **Counseling, therapy, and coaching:** telebehavioral health, text therapy, anonymous virtual group support, 24/7 telephone support and referrals through SupportLinc EAP (phones answered by licensed mental health clinicians), counseling and coaching for children and teens.
- **Tools to stay mentally well:** Healthy IU, work-life programs, mental health first aid training, social connection groups.
- **Policies related to leaves and accommodations:** mental health days, FMLA or workplace accommodations for mental health conditions.



### SUICIDE PREVENTION

Visit the [Suicide Prevention page](#) to connect with suicide and crisis helplines and learn how to assist someone who is in crisis or thinking about suicide.

It's all of our responsibility to foster open communication and build a workplace culture where everyone feels valued and supported. Mental health is an essential aspect of our lives, therefore important to prioritize, both individually and as a community. For questions about the website or coverage for mental and behavioral health under IU-sponsored medical plans, contact AskHR at 812-856-1234 or [askhr@iu.edu](mailto:askhr@iu.edu).





NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNTS

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## SupportLinc EAP (employee assistance program)



888-881-LINC (5462) | [SupportLinc.com](https://www.supportlinc.com)

Challenges at work and home are a part of everyday life. But when they become a distraction, it may be time to reach out for some extra support. SupportLinc provides employees and household members with free, 24/7 access to professional support and referrals. Their licensed care advocates can provide short-term assistance for issues such as grief and loss, work-related pressures, stress, depression, and anxiety, and connect you with ongoing care as needed.

Some of the services available through SupportLinc at no cost include:

- 24/7 access to licensed clinicians for in-the-moment support by phone, text, or video
- Up to six (6) face-to-face counseling sessions per presenting issue
- A comprehensive technology suite including web portal, video counseling platform, digital support groups, and mobile apps
- Expert referrals for local service providers including child and elder care
- Financial and legal planning support and consultations
- Tools to help you find specialized care through the Mental Health Navigator and Addiction Care Navigator

SupportLinc is available 24/7 by calling 888-881-LINC (5462). To access their website or mobile app, create an account at [SupportLinc.com](https://www.supportlinc.com) or through the eConnect mobile app using group code "iu".

SupportLinc upholds strict confidentiality standards. Nobody, including Indiana University, will know you have accessed the program unless you specifically grant permission or express a concern that presents SupportLinc with a legal obligation to release information.



## 24-hour nurse line

800-337-4770

The 24-hour nurse line offers guidance on non-emergency health questions and concerns from registered nurses for IU medical plan members.

## Archimedes

[iuconciierge@archimedesrx.com](mailto:iuconciierge@archimedesrx.com)

855-781-1303

Beginning January 1, 2025, specialty medications will be managed through Archimedes, and filled through their mail order pharmacy partner, AcariaHealth.

## CVS Caremark

[Caremark.com](https://www.caremark.com)



Keep your IU prescription drug benefits at your fingertips by registering for an account at [Caremark.com](https://www.caremark.com) or the Caremark app, which will allow you to:

- Refill mail order prescriptions without registering or signing in (Easy Refill)
- See number of refills due and orders in progress without signing in

- Check order status
- Renew or request new mail service prescriptions
- Check drug costs and coverage
- View prescription history
- Find a pharmacy in your network
- Identify unknown pills
- Check for potential drug interactions

To create an account, visit [Caremark.com](https://www.caremark.com) or download the Caremark app.

## Care.com

[care.com/yourbenefits](https://www.care.com/yourbenefits)

866-814-1638



Care.com is a resource for finding and hiring pre-screened care providers for children, adults, pets, or your home. Eligible employees have access to a premium Care.com membership at no cost to find, book, and pay caregivers; senior care planning services; and backup care at a reduced cost when normal care arrangements are disrupted. The university covers the cost of membership fees, but members pay the full cost of caregivers hired.

Activate your membership by registering at [care.com/yourbenefits](https://www.care.com/yourbenefits) with the employer name "Indiana University."





OPEN ENROLLMENT 2025

# Additional programs, resources, & apps



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Cigna Dental

[mycigna.com](http://mycigna.com)



Access your IU dental benefits 24/7 through the MyCigna web portal and mobile app. You can find dental care and costs, view past claims, and access your dental ID card. You can also consult with a dentist 24/7 virtually if you are experiencing dental pain, oral sores, lesions, swelling or infections. Depending on the situation, the dentist can also prescribe medications such as antibiotics and non-narcotic pain relievers, as appropriate.

To access these resources, log in to [mycigna.com](http://mycigna.com) or the myCigna mobile app.

## WEX (HSA, FSAs)

[benefit-info.com/iu](http://benefit-info.com/iu)



Keep your IU-sponsored HSA and FSAs at your fingertips with WEX's web portal and mobile app. Features include:

- View your balances 24/7
- File and view claims
- Call or email WEX Customer Service
- Pay a provider for eligible services online
- Reimburse yourself for out-of-pocket expenses
- Invest your HSA funds

Get started at [benefit-info.com/iu](http://benefit-info.com/iu) or by downloading the IU HSA/FSA app. If it's your first time logging in, [follow these log in instructions](#).

## Fidelity NetBenefits

[netbenefits.com/indiana](http://netbenefits.com/indiana)



Conveniently manage your IU retirement plans all in one place—from accessing your investments and updating your beneficiary designations, to receiving personalized guidance to make (and stay on track with) your retirement goals. With NetBenefits you can:

- Easily view your retirement savings accounts including your account balances
- View or change your investments
- Review recent contributions
- See how your account(s) are performing
- View or name beneficiaries

Create an account at [netbenefits.com/indiana](http://netbenefits.com/indiana) or download the NetBenefits app to get started.

## Weight Watchers

[iu.ww.com](http://iu.ww.com)



Indiana University is proud to offer Weight Watchers at no cost to all benefit-eligible employees and spouses enrolled in an IU-sponsored medical plan. WW delivers programming in two ways to fit your lifestyle:

- 1. Core (digital only):** an easy-to-use app and website to track your food, movement, and weight goals; barcode scanner, restaurant items, and over 5,000 recipes; and expert chat available 24/7.
- 2. Premium (digital + workshops):** offers access to virtual and community workshops with guidance from a trained WW Coach and motivation from members who are on the same path. There's even a private group just for IU members!

To get started, visit [iu.ww.com](http://iu.ww.com). You and/or your spouse will need your 10-digit university ID to enroll. *IU covers 100% of cost of WW; however, per IRS rules, the value of the program is considered a taxable benefit.*

## Healthy IU

[healthy.iu.edu](http://healthy.iu.edu)



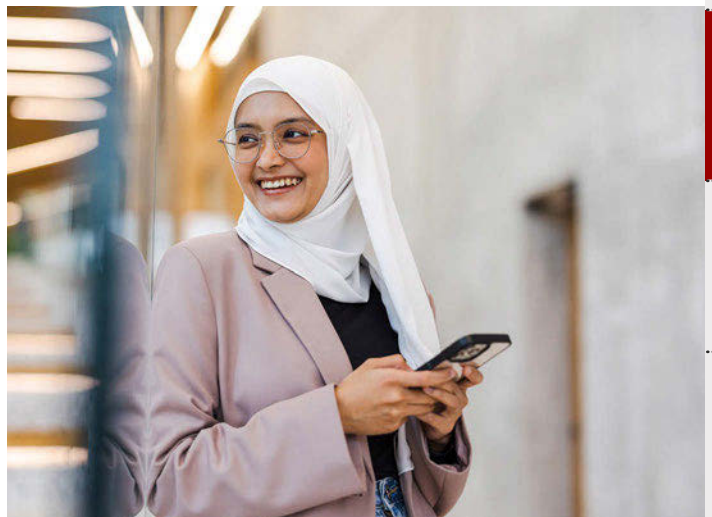
Healthy IU is your workplace wellness program, serving employees and their spouses enrolled on an IU medical plan. Healthy IU strives to inspire the IU community to integrate wellness into every aspect of life through educational resources, programs, challenges, and other initiatives that foster individual well-being and support a culture of wellness in the workplace and beyond.

For more information, and for a list of resources and programs currently available on your campus, visit [healthy.iu.edu](http://healthy.iu.edu).

## The Standard

[login.standard.com](http://login.standard.com)

If you're enrolled in IU-sponsored long-term disability insurance or critical illness insurance, you can create an online account with The Standard to file claims for benefits or file a claim for your \$100 health maintenance screening incentive, or check the status of an existing claim.





OPEN ENROLLMENT 2025

# Additional programs, resources, & apps



## Anthem LiveHealth Online telehealth



[livehealthonline.com](https://livehealthonline.com)

IU medical plan participants have 24/7 access to doctors from a smartphone, tablet, or computer with a webcam through Anthem LiveHealth Online.

Online visits for urgent, allergy, or dermatology care cost around \$59, and a typical visit lasts about 10 – 15 minutes. The provider can assess your condition, provide treatment options, and even send a prescription to the pharmacy, if needed, all from the privacy of your home. Urgent care is also available for children and for Spanish-speaking members.

You can also schedule a virtual visit with a licensed therapist, psychiatrist, or psychologist.

Get started at [livehealthonline.com](https://livehealthonline.com) or download the LiveHealth Online mobile app.

## Marathon Health



[my.marathon-health.com](https://my.marathon-health.com)

IU medical plan participants have access to the Marathon Health network of employee health centers. Their patient portal and mobile app offer quick and easy ways to manage your healthcare needs.

- **Appointment scheduling:** Book appointments with your provider
- **Video visits:** Meet virtually with your care team
- **Messaging:** Communicate securely with your care team
- **Medications:** Manage your prescriptions and request refills
- **Health records:** Easily access your medical records

Get started at [my.marathon-health.com](https://my.marathon-health.com) or download the Marathon Health mobile app.

## Anthem Sydney Health

[sydneyhealth.com](https://sydneyhealth.com)

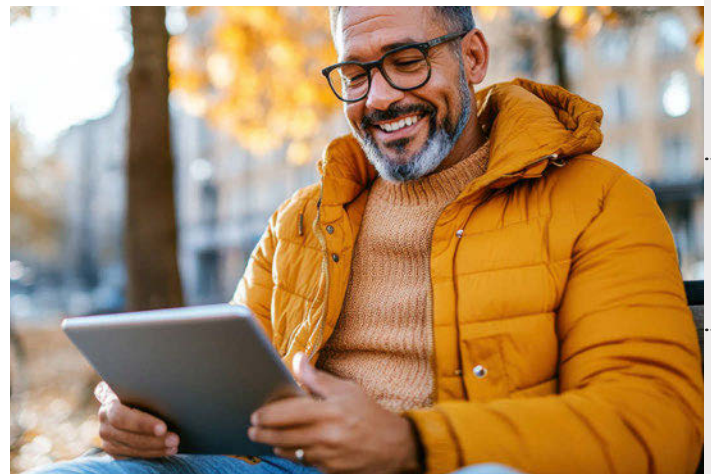


Getting your benefits information when and where you need it is now faster, simpler, and more personal with Sydney. Anthem's Sydney Health app works with IU medical plan members by guiding you to better overall health — and for you by bringing your benefits and health information together in one convenient place. With Sydney you can:

- See your claims and benefit progress
- View and use your Anthem ID card
- Plan and track health and fitness goals
- Find and compare healthcare providers and costs
- Visit with a provider through video or text
- Connect with all of your third party benefits

Sydney acts like a personal health guide, answering your questions and connecting you to the right resources at the right time, and can provide you with alerts, reminders, and tips, suggest a doctor, or help you stay healthy and save money on medical costs.

Download the Sydney Health app and log in using your [anthem.com](https://anthem.com) username and password to get started.



## Save automatically for college with the **Indiana529 Direct** savings plan

**Did you know that you can get tax breaks and other benefits by opening an account specifically designed to save for college?** Also known as qualified tuition programs, 529 college savings plans help you save for future education expenses for anyone—your child, your grandchild, your niece, your nephew, or even yourself.

You can open a 529 savings plan in any state, however, most states offer incentives for their residents. For

example, Indiana taxpayers who sign up for the Indiana529 Direct plan receive additional benefits including no annual account maintenance fees and a state income tax credit equal to 20% of your contributions, up to \$1,500 maximum per year.

Bottom line—no matter what state's plan you sign up for, a 529 savings plan is a smart choice.

Visit [529.iu.edu](https://529.iu.edu) for more information and to learn how IU employees can save automatically through direct deposit of your paycheck.

NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, APPS, RESOURCES

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Customer service contacts



### IU Human Resources

Customer Care: 812-856-1234  
[askhr@iu.edu](mailto:askhr@iu.edu) | [hr.iu.edu/benefits](http://hr.iu.edu/benefits)

### Anthem (medical/vision plans)

Member Services: 844-736-0920  
[anthem.com](http://anthem.com) (Blue Access PPO network in Indiana)  
BlueCard PPO (providers outside Indiana): [bcbs.com](http://bcbs.com)  
BCBS Global Core (overseas care): [bcbsglobalcore.com](http://bcbsglobalcore.com)  
Vision (Anthem Blue View Vision): 866-723-0515

### Archimedes (specialty prescriptions)

Member Services: 888-330-8248  
[iuconciierge@archimedesrx.com](mailto:iuconciierge@archimedesrx.com)

### CVS Caremark (prescription drugs)

Member Services: 866-234-6952  
Mail Order: 866-234-6952  
[caremark.com](http://caremark.com)

### Cigna (dental plan)

Member Services: 800-244-6224  
[cigna.com](http://cigna.com)

### Care.com (child and elder care)

Member Services: 855-781-1303  
[care.com/yourbenefits](http://care.com/yourbenefits)

### Indiana Tobacco Quitline

Member Services: 1-800-QUIT-NOW (1-800-784-8669)  
[quitnowindiana.com](http://quitnowindiana.com)

### SupportLinc EAP (mental health support)

24/7 Support Line: 888-881-LINC (5462)  
[SupportLinc.com](http://SupportLinc.com) (group code "iu")

### The Standard (voluntary insurance plans)

800-378-4668  
[standard.com](http://standard.com)

### Weight Watchers

Member Services: 866-204-2885  
[iu.ww.com](http://iu.ww.com)

### WEX (HSA, FSAs)

Member Services: 800-284-8412  
[IUSupport@wexinc.com](mailto:IUSupport@wexinc.com)  
[benefit-info.com/iu](http://benefit-info.com/iu)

### Fidelity (IU retirement plans)

Member Services: 800-343-0860  
[netbenefits.com/indiana](http://netbenefits.com/indiana)  
Appointments: [Online appointment scheduling](#)

### INPRS (PERF retirement plan)

Member Services: 844-GO-INPRS

## Important federal notices

Employers like IU are required to provide you with notices about your rights and responsibilities related to healthcare coverage. A summary of each is provided below. Visit the [Open Enrollment website](#) for full text of these notices.

### [ACA Health Insurance Marketplace](#)

Basic information about the ACA Health Insurance Marketplace and health coverage offered by IU which meets the affordability and minimum value standards defined by ACA.

### [COBRA](#)

Learn about the temporary extension of certain benefits (such as medical and dental coverage) at group rates in the event that you or your dependents lose coverage.

Prescription drug coverage & Medicare:

#### [Creditable Coverage Notice](#)

For active employees and retirees under age 65.

#### [Non-Creditable Coverage Notice](#)

For retirees age 65 or older.

### [Newborns and Mother's Health Protection Act](#)

Under Federal Law, group health plans cannot restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section.

### [No Surprises Act](#)

When you get emergency care or get treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from surprise billing or balance billing.

### [Notice of Privacy Practices](#)

Notice that IU maintains the privacy of Protected Health Information (PHI) that is received or created by its healthcare plans.

### [Notice of Special Enrollment Rights](#)

IU employees may change health coverage during the year when they experience specified changes in status and there is immediate notification to the employer. This notice contains guidelines for these changes and notification parameters.

### [Premium Assistance Under Medicaid and the Children's Health Insurance Program \(CHIP\)](#)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from IU, the State of Indiana may have a premium assistance program that can help pay for coverage.

### [The Uniformed Services Employment and Reemployment Rights Act \(USERRA\)](#)

USERRA establishes employee eligibility and job entitlements, employer obligations, benefits, and remedies under the Act.

### [Women's Health and Cancer Rights Act \(WHCRA\)](#)

Notice that IU's medical plans cover services related to mastectomy, including reconstruction and prosthesis, as defined by the WHCRA.



NEED TO KNOW

MEDICAL

DENTAL

HEALTH SAVINGS ACCOUNT

FLEXIBLE SPENDING ACCOUNTS

SUPPLEMENTAL AD&D

CRITICAL ILLNESS INSURANCE

LONG-TERM DISABILITY

PROGRAMS, RESOURCES, APPS

CONTACTS & FEDERAL NOTICES

AFTER OPEN ENROLLMENT

## Review the rest of your IU benefits

After Open Enrollment is closed, we encourage you to review your benefits that aren't tied to Open Enrollment and your beneficiaries.

Your medical, dental, supplemental AD&D, critical illness, and flexible spending account elections can only be changed during Open Enrollment, or within 30 days of an [IRS-defined qualifying life event](#) such as marriage or the birth of a child. Other benefits offered by IU, including those listed below, allow you to enroll or change your election, or update your beneficiaries, at any time during the year.

**Review the information below then select the plan name to learn how to make changes to these benefits.**

**Supplemental employee life insurance:** You can enroll in or change your supplemental life coverage at any time during the year, but proof of good health may be required if it's been more than 30 days since your initial eligibility date (typically the date you were hired into a benefit eligible position), or if you want to increase your coverage. You can also update your beneficiaries at any time during the year.

**Supplemental dependent life insurance:** You can enroll in or change your supplemental dependent life coverage at any time during the year. Enrollment in Supplemental Employee Life is required.

**Supplemental retirement plans:** You can enroll in or change your supplemental retirement plans at any time during the year. Other actions you can take at any time include changing your investments and updating your beneficiaries.

**IU tuition benefit:** You can apply for the IU Tuition Benefit for yourself, your spouse, or your eligible children on a semester/term basis or for an entire academic year at one time, as long as your application is received before the semester/term deadline.

**What about my health savings account and long-term disability insurance? I thought I could change those plans at any time during the year.**

You can also change your [health savings account](#) and [long-term disability insurance](#) elections at any time during the year. However, because they're included in this year's Open Enrollment process, they aren't included in this list. Visit the IU benefits website to learn more about [changing these benefits mid-year](#).

## Don't forget to review/update your beneficiaries!

Beneficiary designations take precedence over any other form of legal documentation, including your will. This makes it extremely important to keep them up to date.

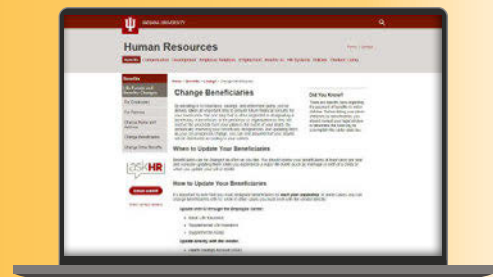
**Remember, you have to name beneficiaries for each plan and each retirement account separately.** In some cases, you can change beneficiaries with IU, while in other cases you must work with the vendor directly.

### Update with IU through the Employee Center:

- Basic life insurance
- Supplemental life insurance
- Supplemental AD&D insurance

### Update with the vendor:

- Health savings account (HSA)
- Retirement savings accounts



Visit the IU Benefits site for [step-by-step instructions to review and update your beneficiaries](#).





INDIANA UNIVERSITY  
**HUMAN RESOURCES**

2709 E 10th Street, Suite 321  
Bloomington, Indiana 47408  
[hr.iu.edu](http://hr.iu.edu) | [askhr@iu.edu](mailto:askhr@iu.edu) | 812-856-1234

**PUBLISHED OCTOBER 2024**