



Human  
Resources



# 2026 **Benefits Guide**

For University of Richmond Employees



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Visit [hr.richmond.edu/benefits](http://hr.richmond.edu/benefits) for more information.

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please see page 40 for more details.

*This Benefit Guide gives you a summary of your benefit offerings for the new year. It's sourced from summary plan descriptions and benefit details, but keep in mind that there might be some differences. If there's any confusion, the actual plan documents are the final word.*





Welcome

# Welcome!

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## Colleagues

At the University, we recognize the vital role our employees play in our success, and we are committed to supporting your well-being through a comprehensive and competitive benefits package.

This guide is designed to help you make informed decisions about the benefits available to you. We encourage you to review the options carefully, discuss them with your household members, and choose the plans that best align with your personal goals and priorities.

Your health, happiness, and success matter to us. We're here to support you—today and into the future.

Sincerely,

Laura Dietrick  
Director of Benefits and Employee Well-Being  
University of Richmond

## How to Use This Guide

When you see a...	You can...
QR Code	Easily click on or scan the QR code to access additional resources.
Term you're unfamiliar with or the light bulb	 Head to the glossary on page 37 to gain a deeper understanding of important terms and phrases related to your benefits.  The light bulb icon signifies key terms or phrases that are crucial for you to know to make more informed decisions about your benefits.



# Benefit Highlights & Resources

## Check out the important highlights for the 2026 plan year

<b>Medical &amp; Pharmacy</b>	<ul style="list-style-type: none"><li>• The University conducted a Request for Proposal (RFP) for medical and pharmacy plans to ensure competitive pricing and sustainable coverage options.</li><li>• After careful review and input from the University Benefits Committee, we have selected <b>Anthem as our new medical and pharmacy plan provider for 2026.</b></li><li>• While there will be an increase in medical premiums, this change helped us significantly reduce the increase we would have faced had we stayed with Cigna.</li><li>• We continue to offer three medical plan options, and there are no changes to the plan designs for 2026.</li></ul> <p><b>Anthem Benefits – For additional information, please see page 14.</b></p> <ul style="list-style-type: none"><li>• Anthem's pharmacy is called CarelonRx</li><li>• Dedicated Family Advocate</li><li>• Download Anthem's mobile App or create a user ID on the Anthem new mobile app/create new user ID for Sydney</li><li>• New Virtual provider – LiveHealth Online via the Anthem Sydney App</li><li>• Watch your mail for your new Anthem ID cards</li></ul>
<b>Workday Enrollment for 2026</b>	<p>All benefit elections will be submitted through Workday.</p> <p><b>Action Required:</b> All employees must log in to Workday to review and submit their 2026 benefit elections – even if no changes are being made.</p> <p><b>Important:</b> After submitting your elections, Workday may prompt you to complete additional steps based on your selections. These may be:</p> <ul style="list-style-type: none"><li>• Verifying a dependent(s)</li><li>• Completing the annual spousal attestation</li><li>• Completing the annual Health Savings Account (HSA) attestation</li><li>• Completing the annual waiver attestation</li><li>• Submitting Evidence of Insurability (EOI) if you elect more than the Guaranteed Issue (GI) amount for voluntary life insurance</li></ul> <p>All steps must be completed by the deadline: Friday, November 7, 2025 for Open Enrollment and within 30 days of hire date or qualified life event. If you do not complete all required tasks in Workday, you may not receive the coverage you intend to elect.</p>
<b>Health Savings Account (HSA)</b>	<p>Employees enrolled in the Base HDHP are now eligible for the additional University contribution if their salary is \$50,000 or less (previously \$40,000). For additional information, including employer contributions, please see page 22.</p>
<b>Dependent Care FSA (Flexible Spending Account)</b>	<ul style="list-style-type: none"><li>• New! Annual maximum will increase from \$5,000 to \$7,500 for 2026.</li><li>• You can enroll in a Dependent Care FSA even if you are not enrolled in one of the medical plans.</li></ul> <p>Please see page 25 of the guide for more information.</p>

<b>Medical FSA (Flexible Spending Account)</b>	If an employee switches to a Health Savings Account (HSA) plan for 2026, the University will <b>not carry over any unused Medical FSA funds from 2025</b> . IRS rules do not allow individuals enrolled in the HSA plan to also participate in a Medical FSA.
<b>Dental</b>	Dental coverage will remain with our current carrier, Delta Dental. <ul style="list-style-type: none"> <li>• Please note the new premiums on page 23.</li> <li>• There will be a few plan design changes for 2026 indicated in red on page 23.</li> </ul>
<b>Voluntary Life Insurance</b>	<b>Open Enrollment (for 2026 only – not available every year):</b> If you haven't previously enrolled in voluntary life insurance or if you wish to increase your coverage, you may elect up to the Guaranteed Issue (GI) amount without a medical questionnaire (Evidence of Insurability). <b>New Hires:</b> You have 30 days from your hire date to enroll in voluntary life insurance coverage up to the Guaranteed Issue (GI) amount without submitting a medical questionnaire (Evidence of Insurability).
<b>Bi-Weekly Employees</b>	There will be 27 pay periods in 2026 instead of the usual 26. All annual premiums will be evenly divided across the 26 paychecks. There will be no benefit premiums deducted from the last bi-weekly paycheck on 12/31/2026.

## Have Questions?

If you have any questions about the employee benefits described herein or would like more information, please refer to your plan documents and insurance booklets [hr.richmond.edu/benefits](http://hr.richmond.edu/benefits).

### Workday

[workday.richmond.edu/get-help/#hr](http://workday.richmond.edu/get-help/#hr)

### Anthem Member Hotline

- 844-614-3102

### Download the Anthem Sydney app

- In the App Store for both Apple and Android phones



### Anthem.com

You can register to use Anthem's site and create an account.

[www.anthem.com/register](http://www.anthem.com/register)

### Delta Dental Customer Hotline

- 800-237-6060

### URHR

- [URHR@richmond.edu](mailto:URHR@richmond.edu)
- 804-289-8747

## Benefits Video

Our benefits video provides an overview of the benefits we offer and includes plan details, enrollment instructions and more!

Watch our benefits video on our website.

<https://www.brainshark.com/1/player/mmanational?custom=2026uofrbenefitspresentation>



Click or scan the code to watch our benefits video!

# Eligibility & Enrollment

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## Who is Eligible

If you are a regular full-time employee, regularly scheduled to work 1511 or more hours per calendar year, you are eligible to enroll in the benefits described in this guide. Eligible dependents may enroll in some coverages.

### Eligible dependents include:

- Legally married spouse
- Natural or adopted children\*
- Children under your legal guardianship\*
- Stepchildren\*
- Children under a qualified medical child support order\*
- Disabled children 19 years or older\*
- Children placed in your physical custody for adoption\*
- Foster children\*

\*See specific plan document for age details.

### Ineligible Dependents:

- Divorced or legally separated spouse
- Common law spouse, even if recognized by your state
- Sisters, brothers, parents or in-laws, grandchildren, etc.

## Required Documents

### Adding a Dependent

If you are adding a dependent not previously verified during Benefits Open Enrollment, documentation proving eligibility is required. Your enrollment in insurance plans will not be processed without the necessary documentation.

Please note:

- International documents must include an official English translation. Documents without translations will not be accepted.
- All documentation for Open Enrollment must be submitted no later than Friday, November 7, 2025.
- For New Hires or those experiencing a qualified life event, documentation must be submitted within 30 days of the event.

Refer below for a list of acceptable documentation for dependent verification.

Relationship	Eligibility Requirement	Documentation to Submit
Legal Spouse	Legal spouse of the Employee	The following document: <ul style="list-style-type: none"> <li>Employee's previous two years of filed federal income tax return Form 1040 – the first page only (social security numbers and financial information should be blacked out).</li> </ul>
Children UNDER age 26	<ul style="list-style-type: none"> <li>Biological child(ren);</li> <li>Stepchild(ren);</li> <li>Legally adopted child(ren) or child(ren) placed in your home for final adoption;</li> <li>Foster child(ren);</li> <li>Child(ren) under legal guardianship;</li> <li>Child(ren) covered under a Qualified Medical Child Support Order.</li> </ul>	ONE of the following documents: <ul style="list-style-type: none"> <li>Birth certificate listing parents or adoption paperwork; issued by a State or County; or</li> <li>Employee's previous two years of filed federal income tax return Form 1040 – the first page only listing the dependent children (social security numbers and financial information should be blacked out); or</li> <li>Qualified Medical Child Support Order (QMCSO) which requires child support for benefit coverage; or</li> <li>Court paperwork for legal guardianship.</li> </ul>
Disabled Children OVER age 26	An unmarried child who became disabled before reaching age 26 and is incapable of self-sustaining employment by reason of mental or physical handicap.	BOTH of the following documents: <ul style="list-style-type: none"> <li>The required documentation for a child UNDER age 26 listed above; AND</li> <li>Any documentation verifying a permanent disability that began before the child attained age 26.</li> </ul>

### Qualified Life Event Changes:

Qualifying Life Events allow you to make mid-year changes to your benefits outside of the annual open enrollment period within 30 days of the event. However, to process a qualified status change, documentation is required to verify the event. Some examples of documentation include:

- Marriage certificate
- Birth certificate (or hospital birth confirmation for newborns)
- Divorce decree
- Proof of loss/gain of coverage from the insurance provider or employer (e.g., COBRA notice, termination letter, or coverage verification letter) including effective date of the gain/loss
- Letter from employer indicating change in employment status and date of change

### Spousal Surcharge

Annually, if you are covering a spouse, you will be asked to complete the Annual Spousal Surcharge Affirmation in Workday.

# Open Enrollment Information

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## When do I enroll?

The annual open enrollment period is **October 27, 2025 through November 7, 2025**. The deadline for submitting your elections and completing any required tasks is **Friday, November 7, 2025**.

The benefits you elect during open enrollment will be effective from January 1, 2026 through December 31, 2026.

## OPEN ENROLLMENT EVENTS

Details about all Open Enrollment events can be found on our website at [hr.richmond.edu/benefits/open-enrollment](https://hr.richmond.edu/benefits/open-enrollment).

### Information Sessions

Please join us for an Open Enrollment Information Session. We will provide a brief overview of your 2026 University benefits. We will hold one in-person session and one virtual session.

- **In Person:** Thursday, October 16, 9–10:30 a.m. in Weinstein Hall, Brown-Alley Room
- **Virtual:** Friday, October 17, 9:30–11:00 a.m., Zoom link: [urichmond.zoom.us/j/87954123400](https://urichmond.zoom.us/j/87954123400) Passcode: 848821

### Open Enrollment Benefits Fairs

Meet with HR and your benefits carriers to ask questions and find out more about your benefits. You can even get your flu shot, too! See the Open Enrollment website for important details: [hr.richmond.edu/benefits/open-enrollment](https://hr.richmond.edu/benefits/open-enrollment).

- Tuesday, October 28, 9 a.m.–4 p.m., Tyler Haynes Commons, Alice Haynes Room
- Wednesday, November 5, 9 a.m.–4 p.m., Heilman Dining Center, Richmond Room
- Friday, November 7, 9 a.m.–4 p.m., Well-being Center

### Open Enrollment Labs

HR will provide Workday enrollment assistance. We encourage you to bring your own laptop or cell phone. Loaner computers will be available onsite, but using your own computer may help reduce wait times at both the Benefit Fairs and Lab sessions.

- Wednesday, **October 29**, 2:30–3:30 p.m., Heilman Dining Center, Lower-Level conference room
- Thursday, **November 6**, Noon–2:00 p.m., Weinstein Hall, Room 221
- Thursday, **November 6**, 2:30–3:30 p.m., Heilman Dining Center, Lower-Level conference room

## How do I enroll?

### Workday

Visit [workday.richmond.edu/get-help/#hr](https://workday.richmond.edu/get-help/#hr) to review the job aid for open enrollment.

# New Hire Information

## When do I enroll?

As a newly eligible employee, you must enroll within **30 days** of your hire date. Remember, this is your only opportunity to make elections until Benefits Open Enrollment, unless you or your family members experience an eligible "change in status" or a qualifying life event.

The benefits you select will be effective through December 31, 2026.

## Beginning of Benefits

	Medical Plan Dental Plan Voluntary Vision Plan	Life/AD&D Insurance LTD Plan EAP STD Plan	Voluntary Life Insurance Program Flex Plan (HSAs and FSAs) Legal Resources	Voluntary Accident Insurance Voluntary Hospital Insurance
Newly hired employees	First day of the month following Hire Date unless Hire Date is the first day of the month, then benefits will begin on that date.			
Employees who switch from part-time to full-time	First day of the month following date you <b>submit</b> your election as long as the election is within 30 days of the status change.			
Current Employees after Open Enrollment (usually late fall)	January 1 of the following year	N/A	January 1 of the following year	January 1 of the following year

## How do I enroll?

### Workday

Visit [workday.richmond.edu/get-help/#hr](http://workday.richmond.edu/get-help/#hr) to review the job aid for new hires.

## Qualifying Life Event Changes

Several benefits may only be elected or changed within 30 days of your hire date, during Open Enrollment, or as the result of a qualifying life event. You must make your change in Workday within 30 days of your qualifying event to make a change; otherwise, you must wait until the next Open Enrollment period. If you experience a Qualifying Life Event change, log into Workday [workday.richmond.edu](http://workday.richmond.edu). Please see page 9 above for examples of documentation accepted.

**NOTE: Benefits begin on the first day of the month following enrollment (not event) as long as you enroll within 30 days of the event with the exception of birth and adoption. Birth and adoption are effective on the date of the event.**

# Quick Checklist

PREPARE	
<input type="checkbox"/>	Log into Workday. If you are unsure of your University netID and password, contact the Help Desk at 804-287-6400 or <a href="mailto:helpdesk@richmond.edu">helpdesk@richmond.edu</a> to ensure you can log in.
<input type="checkbox"/>	Review the Open Enrollment, New Hire, or Change Benefit job aid found at <a href="http://workday.richmond.edu/get-help/#hr">workday.richmond.edu/get-help/#hr</a> .
<input type="checkbox"/>	Visit <a href="http://hr.richmond.edu/benefits">hr.richmond.edu/benefits</a> to learn more about your benefit options.
<input type="checkbox"/>	Important documents and notices regarding the University of Richmond Employee Welfare Benefits Plan (the "Plan") are available in the guide and at <a href="http://hr.richmond.edu/benefits">hr.richmond.edu/benefits</a> . The documents and notices provide information about your enrollment opportunities, benefits coverage, rights, and obligations under the Plan. Because the documents are in PDF format, you may need to download Adobe Reader to read the documents. You have the right to request a paper copy of the documents, free of charge, by contacting <a href="mailto:urhr@richmond.edu">urhr@richmond.edu</a> .
DECIDE	
<input type="checkbox"/>	Review the three Anthem Medical plans and the Health Saving Account, which is available if you choose a High-Deductible Health Plan (HDHP).
<input type="checkbox"/>	Visit PLANselect to utilize our plan decision support tool <a href="https://flimpdecisions.net/welcome/68decb55754b2">https://flimpdecisions.net/welcome/68decb55754b2</a> .
<input type="checkbox"/>	If you are on the Base or Value High-Deductible plan, consider contributing to a HSA.
<input type="checkbox"/>	Review your Delta Dental and Anthem Blue View Vision coverage options.
<input type="checkbox"/>	Evaluate your Voluntary Life needs. <b>Open Enrollment:</b> If you haven't enrolled previously in voluntary life insurance or you want to increase your coverage, you can enroll up to the Guaranteed Issue amount for 2026 without Evidence of Insurability (EOI) or a medical questionnaire. <b>New Hires:</b> You have 30 days to enroll up to the Guaranteed Issue amount without a medical questionnaire.
<input type="checkbox"/>	Consider supplemental Cigna Accident and/or Hospital Insurance coverage.
<input type="checkbox"/>	If you are enrolled in the Choice Open Access plan, consider contributing to the Health Care Flexible Spending Account.
<input type="checkbox"/>	If you have childcare expenses, consider enrolling in the Dependent Care Flexible Spending Account. The amount you can contribute has increased to \$7,500 for 2026.
<input type="checkbox"/>	Consider enrolling in the Legal Services Plan through Legal Resources. More information can be found on page 31.
ACT	
<input type="checkbox"/>	Enroll in/confirm your benefits in Workday. Log in with your University netID and password.
<input type="checkbox"/>	After submitting your elections, Workday may prompt you to complete additional steps based on your selections. These may include <ul style="list-style-type: none"> <li>• Verifying a dependent(s)</li> <li>• Completing the annual spousal attestation</li> <li>• Completing the annual Health Savings Account (HSA) attestation</li> <li>• Completing the annual waiver attestation</li> <li>• Submitting Evidence of Insurability (EOI) if you elect more than the Guaranteed Issue (GI) amount for voluntary life insurance.</li> </ul> <p><b>If you do not complete all required tasks in Workday by the deadline, you may not receive the coverage you intend to elect.</b></p>



# Core Benefits

# Medical Plans



Below outlines your plan options through Anthem HealthKeepers. Networks frequently change, so it is always a good idea to confirm your provider's participation is in-network to avoid additional costs. See page 18 for instructions on finding a provider. Please refer to your plan document for specific details.

Anthem HealthKeepers	Base High-Deductible	Value High-Deductible	Choice Open Access
<b>Services</b>	<b>In-Network</b>	<b>In-Network</b>	<b>In-Network</b>
<b>Deductible</b> Individual / Family	Embedded* \$4,000 / \$8,000	Non-Embedded** \$2,500 / \$4,500	Embedded* \$1,000 / \$2,000
<b>Coinsurance</b> Plan Pays / You Pay	80% / 20%	80% / 20%	70% / 30%
<b>Out-of-Pocket Max</b> Individual / Family	\$6,000 / \$12,000	\$5,000 / \$10,000	\$4,000 / \$8,000
<b>Preventive Services</b>	Covered at 100%	Covered at 100%	Covered at 100%
<b>Primary Care</b>	20% after deductible	20% after deductible	\$30 Copay
<b>Specialist Visit</b>	20% after deductible	20% after deductible	\$60 Copay
<b>Anthem Telemedicine</b>	20% after deductible; \$55 average cost per visit	20% after deductible; \$55 average cost per visit	\$25 Copay
<b>Urgent Care</b>	20% after deductible	20% after deductible	\$60 Copay
<b>Emergency Room</b>	20% after deductible	20% after deductible	30% after deductible
<b>Inpatient Hospital</b>	20% after deductible	20% after deductible	30% after deductible
<b>Outpatient Facility</b>	20% after deductible	20% after deductible	30% after deductible
<b>Services</b>	<b>Out-of-Network</b>	<b>Out-of-Network</b>	<b>Out-of-Network</b>
<b>Deductible</b> Individual / Family	Embedded \$5,000 / \$10,000	Non - Embedded \$4,000 / \$8,000	Embedded \$2,000 / \$4,000
<b>Coinsurance</b> Plan Pays / You Pay	60% / 40%	60% / 40%	50% / 50%
<b>Out-of-Pocket Max</b> Individual / Family	\$10,000 / \$20,000	\$8,000 / \$16,000	\$6,500 / \$13,000

\*Embedded Deductible – In an embedded deductible plan, after each eligible family member meets his or her individual deductible, covered expenses for that family member will be paid based on the coinsurance level specified by the plan.

\*\*Non-Embedded Deductible – In a non-embedded deductible plan, all family members contribute towards the family plan deductible. Once the family deductible has been met in full, the plan will pay each eligible family member's covered expenses based on the coinsurance level specified by the plan.

## Plan Summaries

Summaries of the Base High Deductible plan, Value High Deductible plan, and Choice Open Access plan are available on our website at [hr.richmond.edu/benefits/open-enrollment](http://hr.richmond.edu/benefits/open-enrollment).

# Pharmacy Information



Enrolling in medical coverage provides prescription drug coverage through Anthem CarelonRx. Below highlights information about the prescription drug plan offered.

Formulary: [https://fm.formularynavigator.com/FBO/143/VA\\_National\\_Direct\\_PREFERRED\\_3\\_Tier\\_BVA.pdf](https://fm.formularynavigator.com/FBO/143/VA_National_Direct_PREFERRED_3_Tier_BVA.pdf)

Searchable Drug Lists: <https://client.formularynavigator.com/Search.aspx?siteCode=2314101492>

Anthem HealthKeepers	Base High-Deductible		Value High-Deductible		Choice Open Access	
Rx Deductible	Combined with medical		Combined with medical		\$200 Individual \$400 Family (excludes Tier 1 drugs)	
Rx Out-of-Pocket Max	Combined with medical		Combined with medical		\$3,100 Individual \$6,200 Family	
	30-Day Retail	90-Day Retail	30-Day Retail	90-Day Retail	30-Day Retail	90-Day Retail
	After plan deductible		After plan deductible		After Rx deductible	
Tier 1 Generic	\$15	\$30	\$15	\$30	\$15	\$30
Tier 2 Preferred Brand	\$50	\$100	\$50	\$100	\$50	\$100
Tier 3 Non-Formulary Brand	20%, after deductible (\$80 min & \$400 max)	20%, after deductible (\$160 min & \$800 max)	20%, after deductible (\$80 min & \$400 max)	20%, after deductible (\$160 min & \$800 max)	20%, after deductible (\$80 min & \$400 max)	20%, after deductible (\$160 min & \$800 max)

## Your Prescription Drug Benefits – Anthem CarelonRx

Prescription Drug Benefits offered through Anthem CarelonRx encourages the use of formulary medications. You can access your plan's Rx formulary by logging in to the Anthem website [www.anthem.com](http://www.anthem.com) or using the Sydney mobile app. Use the Price of Medication tool to see the medications your plan covers and specific coverage requirements. If your medication is not listed, ask your doctor about an equivalent medication that is listed on the formulary. Connect with your Family Advocate (see page 19) if you have questions.

Certain preventive medications are available at no cost to you. The list of preventive medications includes both prescription and over-the-counter (OTC) medications. For the plan to cover these medications, you will need a prescription from your doctor, even for the OTC products that are typically available without a prescription. Medications include aspirin, contraceptives, smoking cessation products, and vaccines among others. Log onto the Anthem Sydney app or Anthem site to see the full list.

## Cost Relief

Certain specialty medications are eligible for the Anthem CarelonRx Cost Relief program. There's no cost to participate! If you choose to participate, you'll pay \$0 for your medication. Cost Relief is available on all medical/pharmacy plans offered by the University.

Conditions supported by Cost Relief include, but are not limited to:

- Hepatitis C
- Multiple Sclerosis
- Psoriasis
- Inflammatory Bowel Disease
- Rheumatoid Arthritis
- Oncology

## Pharmacy Home Delivery

Have your medication delivered to your home or other location with CarelonRx (Anthem's pharmacy). You can manage your prescriptions on the Sydney app or [www.anthem.com](http://www.anthem.com).

You'll be able to track your order, set up reminders, and get auto-refills. Shipping is always free with CarelonRx. Your medication will be delivered via discreet packaging that is tamperproof, waterproof, and temperature controlled, as needed.

Many medications will cost less when you fill a 90-day supply.

## Retail Pharmacy Discount Programs

Pharmacies offer generic medication programs for 30 and 90-day supplies for less than \$10. Several popular maintenance medications are offered through these generic programs. To take advantage of these programs, take your prescription to one of the participating pharmacies and present it to the pharmacist. You will not need to show your Provider ID card. It's that easy to start saving money!

## EnsureRx Pharmacy Discount Program

Maximize your prescription savings with your Anthem/CarelonRx coverage. CarelonRx has programs in place that automatically compare discount cards and coupons to ensure that you are receiving the lowest available cost on your medications. These discounts will be available to you when you check out at the pharmacy.

You can log onto [www.anthem.com](http://www.anthem.com) or use the Sydney mobile app to compare drug costs, locate the best in-network prices for your medications, and find discounts on drugs. You can also set up home delivery for your maintenance medications.

## Your Cost

Your payroll deductions are shown below.

### Base High-Deductible Plan

Coverage Tier	Employee Monthly Cost	Employee Per Pay Cost (26 Pays)
Employee Only	\$45.07	\$20.80
Employee/Child	\$153.15	\$70.68
Employee/Spouse	\$224.14	\$103.45
Employee/Spouse w/surcharge*	\$324.14	\$149.60
Employee/Children	\$227.85	\$105.16
Employee/Family	\$395.45	\$182.52
Employee/Family w/surcharge*	\$495.45	\$228.67

### Value High-Deductible Plan

Coverage Tier	Employee Monthly Cost	Employee Per Pay Cost (26 Pays)
Employee Only	\$114.74	\$52.96
Employee/Child	\$215.32	\$99.38
Employee/Spouse	\$330.78	\$152.67
Employee/Spouse w/surcharge*	\$430.78	\$198.82
Employee/Children	\$362.91	\$167.50
Employee/Family	\$608.20	\$280.71
Employee/Family w/surcharge*	\$708.20	\$326.86

### Choice Open Access

Coverage Tier	Employee Monthly Cost	Employee Per Pay Cost (26 Pays)
Employee Only	\$123.02	\$56.78
Employee/Child	\$269.83	\$124.54
Employee/Spouse	\$445.73	\$205.72
Employee/Spouse w/surcharge*	\$545.73	\$251.88
Employee/Children	\$466.95	\$215.52
Employee/Family	\$702.04	\$324.02
Employee/Family w/surcharge*	\$802.04	\$370.17

**NOTE:**

**Waiver:** An employee may choose to waive their enrollment in the University's health insurance plans if they have coverage elsewhere and receive five vacation days (staff only) or a \$500 taxable cash benefit. These amounts are annual benefits, which will be pro-rated over the year. Maximum vacation accrual limits apply. Employees must indicate waiver in Workday and complete the attestation that they have medical coverage elsewhere during initial enrollment and annually during Open Enrollment.

**\*Spousal Surcharge:** UR charges a \$100 per month surcharge to employees who elect to cover spouses who are eligible for group medical coverage through their own employers, or for spouses who are retired and have access to a health plan through their previous employers or retirement plans. More information about the spousal surcharge is available here: [hr.richmond.edu/benefits/insurance/medical-plans/spousal-surcharge.html](http://hr.richmond.edu/benefits/insurance/medical-plans/spousal-surcharge.html).

**Missed Paycheck:** If you do not receive a paycheck and premiums should have been deducted, your premiums will go into arrears and be deducted from your paycheck once you return.

# Anthem Resources

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Anthem is a trusted and reputable healthcare provider, committed to delivering exceptional medical services and prioritizing the well-being of its members. With your medical plan, you gain access to a wide range of valuable resources, ensuring comprehensive care for you and your family.

## Anthem Network – HealthKeepers

The University's Anthem network is HealthKeepers. Anthem HealthKeepers is a robust network within the state of Virginia. If you are traveling in another state, you are covered by Anthem's national network.

### Find Care Tool

The Find Care tool brings together details about doctors, dentists, hospitals, labs, and healthcare facilities in your plan's network. You can easily compare information such as costs, location, and office hours.

You can start using Find Care by downloading the Sydney Health app to your mobile device or logging in to [www.anthem.com/find-care](http://www.anthem.com/find-care). You can log in or search using your Member ID. Enter the code "Z4U" to identify the University's plans, and from there you can search via zip code, provider name, procedure, or provider type.

## Anthem Sydney App

The Sydney Health app by Anthem is a powerful tool that puts your health insurance information right at your fingertips.

With this free app, you can easily:

- Manage your benefits
- Access virtual care visits
- View digital ID cards
- Track claims
- Find in-network care providers
- Estimate cost of care



With the Sydney Health app, managing your health and wellness has never been easier. Download it today and take control of your healthcare journey.

You can scan the QR code to download the Sydney Health™ app today.

## Anthem Family Advocate

Anthem Family Advocates are dedicated professionals who are available to assist you in navigating the healthcare system. With their expertise, they aim to simplify your healthcare experience and provide valuable support.

Each member is assigned a Family Advocate who can help you and your covered family members with everyday health needs and more complex conditions. The Family Advocate is a dedicated contact that you can connect with when you need them most. They have access to your full picture of health with up-to-date information in a single record.

Here's how Anthem Family Advocates can help:

- Answer your medical plan and health questions
- Find a provider
- Schedule appointments
- Advocate for your health
- Work closely with health care professionals
- Navigate pre-authorizations
- Help you get the most out of your plan
- Close gaps in care
- Reduce costs

To get started with your Anthem Family Advocate, simply call the number on your Anthem ID Card. They will be ready to assist you and provide the support you need throughout your healthcare journey. You can also connect to your assigned Family Advocate via the Sydney mobile app.

## Anthem Virtual Care

Virtual care is a convenient and accessible way to receive medical treatment without having to visit a doctor's office in person. With virtual care, you can consult with a healthcare professional through video calls or phone calls, allowing you to receive diagnosis, treatment, and advice for a wide range of common health issues such as cold and flu symptoms, respiratory infections, skin irritations, and urinary tract infections. It's like having a doctor's appointment from the comfort of your own home!

With 24/7 availability, you can access quality care anytime, anywhere, without the need for appointments or long wait times. Telehealth services offer a wide range of benefits, including cost savings, reduced travel time, and increased convenience. Experience the future of healthcare with Anthem's Telehealth Services and receive the care you need when you need it.

Get started with virtual care today through the Sydney Health app.

What can Anthem's Telehealth services help with?	
Preventive, Urgent Care, and Dermatology	Behavioral and Mental Health
Sore throat	Depression
Allergies	Grief/Loss
Headache	Parenting issues
Sinus and ear infections	Life changes
Skin conditions	Stress

## Getting Started with Telehealth

Accessing telehealth services is easy. Log onto [www.anthem.com](http://www.anthem.com) or set up your Sydney mobile app on your phone.

See plan details for more information and specific costs.

## Know Where To Go

If you need immediate medical attention, your first thought may be to go to the Emergency Room. However, if your condition is not serious or life threatening, you may have a less expensive choice. Use the chart below to identify where you should go for care!

Plan	Cost	When to Use
Primary Care	\$	Routine, Primary, Preventive Care Regular Health Screenings Non-urgent treatment Chronic disease management
Virtual Visits	\$	Cold, flu, fever, sore throat, diarrhea, rash, pink eye, sinus infections, cough, headache, stomachache or earache
Convenience Care Clinic	\$\$	Common infections (ear, pink eye, strep, bronchitis), flu shots, vaccines, rashes, screenings <i>CVS Minute Clinic</i>
Urgent Care	\$\$\$	Sprains, small cuts, strains, sore throats, minor infections, mild asthma, back pain or strain, vomiting, flu, fever, sports injuries <i>After-hours care &amp; no appointments necessary</i>
Emergency Room	\$\$\$\$	Heavy bleeding, large open wounds, chest pain, spinal injuries, difficulty breathing, major burns, severe head injuries, seizures, unconsciousness, poisoning <i>Life threatening emergency</i>

*If you believe you are experiencing a medical emergency, go to your nearest emergency room or call 911, even if your symptoms are not as described here.*



[Click here to watch a video about Knowing Where To Go: flimp.live/MMA\\_Where\\_To\\_Go.](https://flimp.live/MMA_Where_To_Go)

## Vera

Vera is a new primary care concept, serving Anthem members exclusively. Vera offers primary care and urgent care visits, along with virtual visits. You can schedule same- or next-day appointments, fill a prescription after you meet with a provider, get lab work done with the on-site lab, and more.

Vera is located in Scott's Addition, with additional locations around Richmond opening soon.

3810 West Broad Street, Suite 104  
Richmond, VA 23230

Call 804-917-0037 to schedule your appointment.

# Anthem Resources

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## Anthem's Building Healthy Families

Every family grows in its own way. That's part of what makes each one unique. Anthem's Building Healthy Families program is available at no extra cost to you and can help your family grow strong whether you're trying to conceive, expecting a child, or in the thick of raising young children.

Building Healthy Families offers personalized, digital support through the Sydney<sup>SM</sup> Health mobile app or on [anthem.com](https://www.anthem.com). This convenient hub offers an extensive collection of tools and information to help you navigate your family's unique journey.

### Where do you start?

Sign up for this program designed to help you and your baby stay healthy during your pregnancy and in the days and weeks after your baby's birth.

You'll have access to track ovulation, monitor prenatal health risks, and get updates on your baby's development during pregnancy. You can log feedings, diaper changes, and developmental milestones within the app. Explore the digital library and find articles and videos on a variety of family-building topics.

### Find support

- Tell us about you and your pregnancy so we can meet your needs.
- Ask us anything – we have nurses here to support you during your whole pregnancy.
- Chat with a Family Care coach in the app for general questions.
- Get lactation support postpartum.
- Connect with your assigned Family Advocate.

### Get rewarded for enrolling in the program

Anthem's Building Healthy Families is part of the University's Smart Rewards Incentive Program. When you take part and finish the program, you'll be eligible for up to \$250 in rewards if you complete all four stages of the program.

- \$50 gift card – Complete the Member Profile.
- \$50 gift card – Complete the Pregnancy Screener.
- \$50 – Complete the "Before Baby" Questionnaire at least one day before delivery.
- \$100 – Complete the "After Baby" Questionnaire within 56 days of baby's arrival.

## Fertility

The journey to parenthood is not always easy. If you are struggling to conceive, WINFertility is here to help. University of Richmond families enrolled in the Anthem medical plan have benefits toward fertility treatments. WINFertility is there to support you in every step of your fertility journey.

How to contact WINFertility for details and eligibility: 877-434-7063 or [managed.winfertility.com/Richmond](https://managed.winfertility.com/Richmond).

# Health Savings Account



## Health Savings Account (HSA)

New for 2026: Employees enrolled in the Base HDHP are now eligible for the additional University contribution if their salary is **\$50,000 or less** (previously \$40,000).

If you enroll in one of the High-Deductible Health Plans, you can open a Health Savings Account (HSA) to help pay for eligible medical expenses. Money is deposited in your HSA on a pre-tax basis. You must enroll and complete the eligibility attestation in Workday to receive the employer contribution. If you are a new hire, you will receive a pro-rated lump sum employer contribution based on your benefit effective date. You may receive notifications from Health Equity requesting additional information required to establish your account. **You must enroll and attest you are eligible to participate in the HSA every year to contribute and receive the University's contribution.**

### How does an HSA work?

- You can make tax-free contributions via payroll deduction
- You can use HSA funds to pay eligible out-of-pocket medical, vision, and dental expenses for yourself and your eligible dependents

### University of Richmond Contributions to Employee HSAs

		Base High-Deductible Health Plan			
Base Salary	Employee only	Employee + child(ren)	Employee + spouse	Employee + family	
> \$50,000	\$1,000	\$1,500	\$1,500	\$2,000	
≤ \$50,000	\$1,500	\$2,500	\$2,500	\$3,000	
		Value High-Deductible Health Plan			
Base Salary	Employee only	Employee + child(ren)	Employee + spouse	Employee + family	
> \$50,000	\$500	\$750	\$750	\$1,000	
≤ \$50,000	\$500	\$750	\$750	\$1,000	

### Maximum HSA Contributions\*

**2026**

**\$4,400**

Individual Maximum

**\$8,750**

Family Maximum

**\$1,000**

Catch-Up Contribution if age 55 or older

*\*Includes employer contribution*

### Are you eligible for an HSA?

- You cannot be covered under a non-HDHP plan (yours or your spouse's)
- You cannot be enrolled in Medicare Part A and/or Part B
- You do not receive health benefits under TRICARE
- You cannot have received medical benefits from Veteran's Administration (VA) for any non-service-connected disabilities at any time during the previous three months
- You cannot be claimed as a dependent on another person's tax return
- You are not covered by a general-purpose health care flexible spending account (FSA)

### Advantages of a Health Savings Account

- You decide how much to set aside for health care costs
- You control how to spend the money
- You receive tax benefits, including maximizing your tax savings and carrying over your money tax-free each year
- Any unused money stays in your account
- The account balance rolls over from year to year
- You own the account, and the money is yours even if you change jobs
- You can grow your money by saving or investing

### Qualified Medical Expenses

- The IRS maintains a list of all eligible expenses, common qualified expenses include acupuncture, ambulance services, dental treatment, contact lenses, doctor's fees and hearing aids.
- View the complete list of qualified expenses at [irs.gov/publications/p502/index.html](https://irs.gov/publications/p502/index.html).

# Voluntary Dental



Below is an overview of your available dental plans. Using an in-network provider will offer you the lowest service pricing. Visit [deltadentalva.com](http://deltadentalva.com) for a list of dentists near you. Age and frequency limits may apply to some services. Please refer to your plan document for specific details and note that out-of-network providers can balance bill you the difference between what they charge and the carrier's **reasonable and customary amount**. See Delta Dental detailed benefits sheets for additional information: [hr.richmond.edu/benefits](http://hr.richmond.edu/benefits).



Benefits	Base Plan	Enhanced Plan
	In-Network	In-Network
Calendar Year Deductible Individual / Family	\$75 / \$225	\$50 / \$150
Calendar Year Benefit Maximum	\$1,000	\$2,000
Preventive Services	Covered at 100% Deductible waived	Covered at 100% Deductible waived
Basic Services	20% after deductible	20% after deductible
Major Services	Not Covered	50% after deductible
Orthodontia Adults & dependent children up to age 26	Not Covered	50% after deductible
Orthodontia Lifetime Maximum	Not Applicable	\$2,000

## Your Cost

2026 Dental Coverage Tier	Employee Monthly Cost	Employee Per Pay Cost (26 Pays)	Employee Monthly Cost	Employee Per Pay Cost (26 Pays)
	Base Plan		Enhanced Plan	
Employee Only	\$25.92	\$11.96	\$38.30	\$17.68
Employee & Spouse	\$46.96	\$21.67	\$69.39	\$32.03
Employee & Child*	\$46.96	\$21.67	\$69.39	\$32.03
Employee & Children*	\$80.40	\$37.11	\$118.80	\$54.83
Family	\$80.40	\$37.11	\$118.80	\$54.83

\*Employee & Child is the employee plus one child. Employee & Children is the employee with more than one child.

# Voluntary Vision



Below is an overview of your available vision plan. Using an in-network provider will offer you the lowest service pricing. Frequency limits may apply to some services. Please refer to your plan document for specific details and note that out-of-network providers can balance bill you the difference between what they charge and the carrier's reasonable and customary amount. See the Anthem detailed benefits at <https://sl.richmond.edu/EL>.

Visit [www.anthem.com](http://www.anthem.com) for a list of eye doctors near you.

Benefits	Blue View Vision Plan	
	In-Network*	Out-of-Network Reimbursement
Exam	\$15	Up to \$35
Frames/Lenses	\$150 allowance plus 20% off remaining balance	Up to \$45
Lenses	\$25	Single: Up to \$25, Bifocal: Up to \$40, Trifocal: Up to \$55
Contact Lens Fitting	Up to \$55	N/A
Elective Contacts	\$150 allowance	Up to \$105
Frequency of Services		
Exams	Once every 12 Months	Once every 12 Months
Frames	Once every 24 Months	Once every 24 Months
Lenses or Contacts	Once every 12 Months	Once every 12 Months

\* Using a provider that is out of the network shown above, you may experience higher costs.

## Your Cost

2026 Vision Coverage Tier	Employee Monthly Cost	Employee Per Pay Cost (26 Pays)
Employee Only	\$4.83	\$2.23
Employee & Spouse Employee & Child	\$8.45	\$3.90
Employee & Children	\$9.66	\$4.46
Family	\$14.06	\$6.49

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## Flexible Spending Accounts (FSA)

FSAs provide you with an important tax advantage that can help you pay for expenses on a pre-tax basis. By anticipating your family's costs for the next year, you can lower your taxable income.

**You must enroll in your FSA every year to contribute.** Your FSA plan options are shown below.

### Medical FSA

- Allows employees who are **not** enrolled in an HDHP or contributing to an HSA to pay for certain IRS-approved medical care expenses with pre-tax dollars.
- The annual maximum contribution of \$3,400 can be used for eligible health care related expenses, including medical, dental and vision expenses.
- There is a \$660 carryover from 2025 into 2026, and a \$680 carryover from 2026 into 2027.
  - Carryover funds will not be available to use until the run-out period has ended for the prior year's plan claim submission deadline of March 31.
  - Carryover funds will only be available for use through December 31 of the following year.
  - If you enroll in an HSA, any remaining FSA balance will be forfeited, and carryover will not apply.
- Services must be incurred between January 1 and December 31, 2026.
- All claims must be submitted by March 31, 2027.

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### Dependent Care FSA – New: Annual maximum will increase from \$5,000 to \$7,500 for 2026

- Allows employees to use pre-tax dollars toward qualified dependent care such as caring for children **under age 13** or caring for elders.
  - **The annual contribution maximum is \$7,500 (or \$3,750 if married and filing separately).**
  - **Funds are only available after they are deducted from your paycheck. Funds are not eligible for carryover.**
-

# Supplemental Health Benefits



The supplemental health benefit options below can be used to customize your coverage to complement your medical plan options. If you select any of the voluntary options below, you will be responsible for the cost of the benefit. The full list of covered services is outlined in the Cigna Summary at [hr.richmond.edu/benefits/insurance](http://hr.richmond.edu/benefits/insurance).

## Accident Insurance

Accident Insurance pays a lump-sum benefit directly to you based on the type of injury sustained and treatment needed. This policy includes a Wellness Benefit of \$50 for you and your dependents.

Accident coverage can help to reimburse you for expenses like:

- ✓ Ambulance transportation
- ✓ Coverage for medical expenses, hospital stays, and surgeries
- ✓ Therapy charges and rehabilitation costs
- ✓ Income protection in the event of temporary or permanent disability
- ✓ No medical exam required for quick and easy coverage

Wellness Benefit
\$50

Accident Insurance		
2026 Coverage Tier	Employee Monthly Rates	Employee Per Pay Rates (26 Pays)
Employee	\$10.29	\$4.75
Employee/Spouse	\$16.32	\$7.53
Employee/Child(ren)	\$20.28	\$9.36
Family	\$26.31	\$12.14

## Hospital Indemnity Insurance

This plan works as a supplemental insurance plan designed to pay for the costs of a hospital admission that may not be covered by other insurance. This plan pays cash directly to you to cover out-of-pocket expenses. The payments can be used for any purpose including medical copays, deductibles, or regular expenses (food, rent, utilities).

Wellness Benefit
\$50

Hospital Indemnity Insurance		
2026 Coverage Tier	Employee Monthly Rates	Employee Per Pay Rates (26 Pays)
Employee	\$18.91	\$8.73
Employee/Spouse	\$38.52	\$17.78
Employee/Child(ren)	\$30.96	\$14.29
Family	\$50.57	\$23.34

# Health & Wellbeing Programs

## Behavioral Health

Behavioral health is the promotion of mental health, resilience, and well-being, as well as the support of those who experience depression, anxiety, family or relationship issues, or substance abuse disorders. URWELL Employee, a partnership between Human Resources and Health Promotion, provides a behavioral health program that supports our employees' full mental and emotional well-being. Access your University Wellbeing resources: [hr.richmond.edu/benefits/employee-wellbeing/](https://hr.richmond.edu/benefits/employee-wellbeing/).

Get more information here: [hr.richmond.edu/benefits](https://hr.richmond.edu/benefits).

## Employee Assistance Program (EAP)

Our EAP can offer valuable support by providing confidential counseling and resources to help you with personal and work-related issues. The EAP is available for free to **ALL** employees and anyone living in your household. Visit our Employee Wellbeing website to see all that we offer at [hr.richmond.edu/benefits/employee-wellbeing](https://hr.richmond.edu/benefits/employee-wellbeing).

EAP services include up to 4 in-person consultations, referrals, and resources.

### EAPs can help with issues such as:

- marital and family concerns
- depression
- substance abuse
- grief and loss
- financial entanglements
- finding daycares
- legal guidance and other personal issues

Studies show that employees who used EAP services reported higher levels of work-life balance and lower levels of work-family conflict. \*

*\* Journal of Occupational Health Psychology*



Reach out to Anthem 24/7; counselors are available by calling 855-873-4932 or visiting the website at [Anthem.com/eap](https://Anthem.com/eap). Log in using company name: University of Richmond.

The University of Richmond is committed to your well-being and understands the challenge of balancing work and life obligations. Employees can take advantage of this resource with full confidence that all information discussed with Anthem will be kept confidential.

## Onsite Behavioral Health Counselor

Short-term, onsite counseling is available to all employees for no additional charge. The onsite behavioral health counselor will assist employees in maneuvering through the Employee Assistance Program (EAP) and deliver a deeper level of engagement. They can also provide management consultation and training support.

Your appointments are confidential and private.

### Contact our counselor directly for appointments:

Shauna Christian

[Shauna.christian@richmond.edu](mailto:Shauna.christian@richmond.edu)

804-396-4197

[calendly.com/shauna1](https://calendly.com/shauna1)

## Health Advocate

Health Advocate is a valuable resource that empowers you to take control of your health and well-being. As an employee, you have access to a wide range of personalized services and support through Health Advocate. Whether you need assistance navigating the complex healthcare system, finding the right doctors or specialists, understanding your medical bills, or managing a chronic condition, Health Advocate is here to help. Their team of experts can provide guidance, answer your questions, and advocate on your behalf to ensure you receive the best possible care.

With Health Advocate, you can save time, reduce stress, and make more informed decisions about your health. Take advantage of this valuable benefit and let Health Advocate be your trusted partner in achieving and maintaining your optimal health. Health Advocate is a free service available to all full-time employees, their spouses, dependent children, parents, and parents-in-law. To take advantage of this service, call Health Advocate directly at 866-695-8622 or visit [healthadvocate.com/uofrichmond](https://healthadvocate.com/uofrichmond).

## University Wellbeing Resources

### Care.com

The University provides Care.com membership for all full-time employees. Care.com can help you find short- and long-term care for children, seniors, pets, and more. Visit the Child and Adult Care page to learn more: [hr.richmond.edu/benefits/employee-wellbeing/child-adult-care.html](https://hr.richmond.edu/benefits/employee-wellbeing/child-adult-care.html).

### Elder Care Resources

The University has partnered with Long Term Care Consultants Inc. to provide employees with long-term care and Medicare resources. The consultants can review policies, explain how Medicare and long-term care work, help with questions about caring for seniors, and more! Learn more at [hr.richmond.edu/benefits/employee-wellbeing/long-term-care.html](https://hr.richmond.edu/benefits/employee-wellbeing/long-term-care.html).

Dori Abell – [dori@ltccinc.com](mailto:dori@ltccinc.com)

Jared Williams – [jared@ltccinc.com](mailto:jared@ltccinc.com)

Don Vaught – [don@ltccinc.com](mailto:don@ltccinc.com)

### Other University Benefits

For more employee perks, such as summer day camps for employee dependents, flexible work arrangements, and employee appreciation events, follow the link: [hr.richmond.edu/benefits/employee-wellbeing/](https://hr.richmond.edu/benefits/employee-wellbeing/).

## URWELL EMPLOYEE INCENTIVE PROGRAM – Anthem Smart Rewards

Anthem's Smart Rewards (formerly MotivateMe) is an incentive program that helps improve your health while rewarding you for the healthy actions you take.

ALL full-time employees may participate in programs and activities to reach your goals and earn up to **\$200 annually in gift cards** to a wide range of stores.

- A list of available healthy actions and goals
- Details on how to get started
- Instructions on how to earn and redeem rewards

For more information, visit [hr.richmond.edu/benefits](http://hr.richmond.edu/benefits), call Anthem at 844-614-3102, navigate to [www.anthem.com](http://www.anthem.com) or log into the Anthem Sydney App.

### Sample of Smart Rewards Activities:

Category	Description	Gift Card \$ Earned Anthem Enrolled Employees	Gift Card \$ Earned Non-Anthem Enrolled Employees
Health Assessment	Complete the health risk assessment located in the Sydney app or <a href="http://www.anthem.com">www.anthem.com</a> . You must complete before you are eligible to earn any of the dollars listed below.	Required	Required
Annual Preventive Exam for Anthem Members	<ul style="list-style-type: none"> <li>- Annual Physical Exam</li> <li>- OB/GYN Well Woman Exam</li> <li>- Cervical Cancer Screening Exam</li> <li>- PSA/Prostate Screening Exam</li> <li>- Preventive Mammogram Exam</li> <li>- Preventive Colon Cancer Screening Exam</li> </ul>	\$50 (cap of 2, max of \$100)	\$50 (cap of 2, max of \$100)
Well-being Coaching Mission	Make progress toward a goal to overcome a health problem by working with an Anthem coach. Connect via the Sydney app to begin.	\$25 (cap of 1)	N/A
COVID-19 Vaccine	Get a preventive COVID-19 vaccine and self-report the activity.	\$25 (cap of 1)	\$25 (cap of 1)
Flu Vaccine	Get a preventive flu vaccine and self-report the activity.	\$25 (cap of 1)	\$25 (cap of 1)
Dimensions of Wellness	Physical, Intellectual, Financial, Occupational, Emotional, Social and/or Spiritual/Environmental Goal(s)	\$10 for 1 of each type of Wellness Dimension	\$10 for 1 of each type of Wellness Dimension
The Maximum Dollars an Employee is Eligible to Earn Annually		\$200 max	\$200 max

# Life & Disability



## New York Life Basic Life and AD&D Insurance

Full-time employees receive employer-paid group life and accidental death and dismemberment (AD&D) insurance in the amount of 2X your base salary rounded to the next higher \$1,000 if not already a multiple, to a maximum of \$100,000. Benefits will reduce to 65% at age 65, 45% at age 70, 30% at age 75, and 20% at age 80. Don't forget to keep your beneficiaries up to date.

## New York Life Voluntary Life Insurance

You have the option to purchase voluntary life insurance in the increments listed below through the convenience of payroll deduction. Employee benefits begin to reduce at age 65; spouse coverage ends at age 70. Employees must be enrolled in coverage to enroll dependents.

Voluntary Life Insurance	
 Evidence of Insurability	If you purchase coverage above the guaranteed issue amount for you or your spouse, you will not be eligible or charged for that coverage until approved by New York Life. You must complete the Evidence of Insurability (EOI) form within 30 days of applying for coverage. More information and the form can be found here: <a href="http://hr.richmond.edu/benefits/insurance/life/voluntary.html">hr.richmond.edu/benefits/insurance/life/voluntary.html</a>
 Guaranteed Issue	Employee: \$200,000
Employee Coverage	Increments of \$10,000 Up to a max of 5X salary or \$500,000, whichever is the lesser
Spouse Coverage	Increments of \$10,000 up to \$50,000 Coverage ends at age 70
Child Coverage	Increments of \$2,000 to \$10,000 Max Dependent Under 6 Months: \$500 Max

Additional coverage may be purchased above the guaranteed amount up to the lesser of 5 times the employee's base salary or \$500,000. Coverage above the guaranteed amount will be subject to medical review.

NOTE: If both spouses are employed full time at the University only one may cover a dependent child and they may not purchase voluntary life insurance for the spouse. Please work with your spouse to ensure that this information is correct in the system.

# Life & Disability



## New York Life Disability

In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided by the University. Visit [hr.richmond.edu/benefits](http://hr.richmond.edu/benefits).

	Short-Term Disability	Long-Term Disability
Premium Paid By	University of Richmond	University of Richmond
Percentage of Income Replaced	Staff: 66 2/3% of covered earnings Faculty: 100% of covered earnings	66 2/3% of covered earnings Up to a maximum benefit of \$10,000/month
If approved, benefits begin	After 14 days of disability and approval from New York Life	After 180 days of disability and approval from New York Life
Benefits Duration	Up to the end of the 24th week benefit period, or until you no longer qualify for benefits, whichever occurs first	Age 68.5 or under = The Employee's 70th birthday Age 68.5 or older = The date the 12th Monthly Benefit is payable

## Legal Resources



Legal support is essential for individuals to navigate the complexities of the legal system and protect their rights. Whether it's understanding legal documents, seeking advice on legal issues, or accessing resources for self-representation, having access to legal resources ensures that individuals can make informed decisions and effectively address their legal needs.

Legal Resources provides a variety of legal services to University of Richmond full-time employees with the cost of the attorney fees fully covered by the employee's monthly premium.

The cost is \$18.00 per month for you, your spouse, and children up to age 26 for a 12-month commitment. There are no additional fees for the following basic covered services:

- Identity theft
- Unlimited consultation and advice
- Wills and estate planning
- Traffic court
- Real estate
- Family law
- Elder law

For more information, go to [hr.richmond.edu/benefits](http://hr.richmond.edu/benefits).

# Retirement



## 403(b) University Retirement Plan - TIAA

Saving for retirement offers significant advantages, including financial security, tax benefits, and the potential for compound interest growth. By diligently saving for retirement, individuals can ensure a comfortable and worry-free lifestyle during their post-work years. Additionally, employer contributions can provide a substantial boost to retirement savings, further enhancing one's financial well-being.

The University of Richmond Retirement Plan is a 403(b) defined contribution plan.

### Employee Contributions

All employees, except for student employees, may make pre-and/or post-tax (Roth) contributions to the retirement plan as soon as they become an employee and set up their contribution in Workday. To learn how to update your retirement contribution, visit [workday.richmond.edu/get-help/](https://workday.richmond.edu/get-help/).

### Employer Contributions

All employees who have completed one year of service (worked 1,000 hours during a 12-month period) and have reached age 18 are eligible to participate in the employer contribution portion of the Plan. Once employees have satisfied these eligibility requirements, they must complete the online enrollment process to participate in this portion of the Plan. If employees do not enroll, an account will be established for them and the University will make the 5% contribution into the Target Date Funds closest to the date of their retirement.

The year of service requirement will be waived if a new employee has been employed at an institution of higher education for the full 12 months immediately preceding their date of hire. In the case of a faculty member, the year of service requirement will be waived if they were employed at an institution of higher education for the full academic year immediately preceding their employment with the University.

All employee and employer contributions are vested immediately. For more information, visit: [hr.richmond.edu/benefits/retirement](https://hr.richmond.edu/benefits/retirement) or for the job aid, visit [workday.richmond.edu/get-help/#hr](https://workday.richmond.edu/get-help/#hr).

# Education Benefits

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## Tuition Remission & Tuition Exchange

As an institution of higher learning, the University of Richmond offers a unique and valuable benefit to employees and dependents, tuition remission. The tuition remission benefit covers both credit and non-credit classes offered at the University of Richmond, with stipulations for both full-time and part-time employees.

The University of Richmond also participates in tuition exchange programs with other colleges and universities, making it possible for a full-time employee's dependent children to attend participating colleges or universities through a competitive scholarship process.

Full-time employees, their spouses, and their dependent children are also eligible, as per the tuition eligibility guidelines, to take Executive Education courses at the University.

Please note: The employee, spouse, or dependent children must be academically qualified and must go through regular admission and registration procedures.

Details about our tuition remission, tuition exchange, and eligibility can be found on our website at [hr.richmond.edu/benefits/education/](http://hr.richmond.edu/benefits/education/).

# Absence & Time Off

## Leave Benefits

University of Richmond employees enjoy generous leave benefits, including fifteen paid holidays and two floating holidays annually. New staff members accrue fifteen vacation days and twelve sick days in their first year. All time off is pro-rated based on an employee's hire date and work schedule. In addition, the University offers a variety of leave options to accommodate individual needs, including parental leave, bereavement leave, and more.

Information about all leave benefits can be found on our website at [hr.richmond.edu/benefits/leave](http://hr.richmond.edu/benefits/leave).

## Holidays

The University observes fifteen holidays annually:

Holiday	2026 Dates Observed
New Year's Day (or Monday after)	Thursday, 1/1/2026
Martin Luther King, Jr. Day	Monday, 1/19/2026
Memorial Day	Monday, 5/25/2026
Juneteenth	Friday, 6/19/2026
Independence Day	Friday, 7/3/2026
Labor Day	Monday, 9/7/2026
Thanksgiving Holiday (3 days; dates vary annually)	Wednesday, 11/25–Friday, 11/27/2026
Winter Break (6 days; dates vary annually)	Thursday, 12/24–Thursday, 12/31/2026
<b>Two Floating Holidays</b> Employees will receive two floating holidays each calendar year. Eligible New Hires will receive: <ul style="list-style-type: none"> <li>• 2 floating holidays if hired prior to July 1<sup>st</sup></li> <li>• 1 floating holiday if hired between July 1<sup>st</sup> and October 31<sup>st</sup></li> </ul>	

## Vacation

Length of Continuous Service	Monthly Accrual	Yearly Accrual	Maximum Accrual*
1 month - 9 years	1.25 days	15 days	30 days
9 years and 1 month - 14 years	1.5 days	18 days	36 days
14 years and 1 month or more	1.67 days	20 days	40 days

\*Staff who are regularly scheduled to work at least 1,000 hours per year (base schedule is at least 1,000 hours or more) will earn vacation.

Hourly employees will earn vacation based on the number of hours paid each pay period, new exempt employees who work, at least one day of the month will receive their full accrual for that month.

\*Part-time employees accrue vacation time on a pro-rated basis based on the hours paid in the pay period.

\*10 and 11-month staff accrue during the pay periods they work. They do not accrue during the months they aren't working and do not receive a pay check or are receiving their deferred payout (if applicable).

## Sick

Eligible employees accrue one day of sick leave\* for each month of continuous employment up to a maximum of 65 work days.

\*Staff who are regularly scheduled to work at least 1,000 hours per year (base schedule is at least 1,000 hours or more) will earn sick.

\*10 and 11-month staff accrue during the pay periods they work. They do not accrue during the months they aren't working and do not receive a pay check or are receiving their deferred payout (if applicable).

\*Hourly employees will earn sick leave based on the number of hours paid each pay period, new exempt employees who work at least one day of the month will receive their full accrual for that month.

\*Part-time employees accrue sick time on a pro-rated basis.

## Other Types of Leave

**Family Medical Leave** [hr.richmond.edu/benefits/leave/fmla.html](http://hr.richmond.edu/benefits/leave/fmla.html)

**Parental** [hr.richmond.edu/benefits/leave/parental/](http://hr.richmond.edu/benefits/leave/parental/)

**Short-Term Disability** [hr.richmond.edu/benefits/insurance/disability/short-term.html](http://hr.richmond.edu/benefits/insurance/disability/short-term.html)

**Military** [hr.richmond.edu/benefits/leave/military.html](http://hr.richmond.edu/benefits/leave/military.html)

**Bereavement** [hr.richmond.edu/benefits/leave/bereavement.html](http://hr.richmond.edu/benefits/leave/bereavement.html)

**Jury** [hr.richmond.edu/benefits/leave/jury.html](http://hr.richmond.edu/benefits/leave/jury.html)

**Voting** [hr.richmond.edu/benefits/leave/voting.html](http://hr.richmond.edu/benefits/leave/voting.html)



# Things to know



# Important Terms

Actively at Work	Being physically present at your place of employment and actively performing the duties of one's occupation on a full-time basis, often a qualifying factor in coverage.
Coinsurance	A percentage of a health care cost that the covered employee pays after meeting the deductible.
Copayment (Copay)	A fixed dollar amount for each doctor visit that the covered employee pays for a health care service, usually when the service is received. For example, a primary care doctor may charge a nominal copay per visit.
Deductible	A fixed dollar amount that the covered employee must pay out-of-pocket each calendar year before the plan will begin reimbursing for non-preventive health expenses. Plans usually require separate limits for individual and other coverage tiers.
Embedded vs. Non-Embedded Deductibles	An embedded deductible refers to a deductible that applies to each individual within a family plan, while a non-embedded deductible applies to the entire family as a whole.
Explanation of Benefits (EOB)	A record of a person's past and current health events. A "detailed receipt." Ask for this whenever you have a medical service performed for your records. FSAs, HSAs, and HRAs will sometimes need this additional verification.
Evidence of Insurability (EOI)	Is a record of a person's past and current health events. It is used by insurance companies to verify whether a person meets the definition of good health.
Guaranteed Issue (GI)	A requirement that health plans must permit you to enroll regardless of health status, age, gender, or other factors that might predict the use of health services. Except in some states, GI doesn't limit how much you can be charged if you enroll.
In-Network	Doctors, clinics, hospitals, and other providers with whom the health plan has an agreement to care for its members. Health plans cover a greater share of the cost for in-network health providers than for providers who are out-of-network.
Out-of-Network	A health plan will cover treatment for doctors, clinics, hospitals, and other providers who are out-of-network, but covered employees will pay more out-of-pocket to use out-of-network providers than in-network providers.
Out-of-Pocket Maximum	The most an employee could pay during a coverage period (usually one year) for his or her share of the costs of covered services, including copayments and coinsurance.
Preventive Care	Most health plans must cover a set of preventive services – like shots and screening tests – at no cost to you. Visit <a href="https://www.healthcare.gov/coverage/preventive-care-benefits/">https://www.healthcare.gov/coverage/preventive-care-benefits/</a> to view free preventive services for all adults, women, and children.
Premium	The amount the employee pays for health insurance.
Reasonable and Customary	Refers to the standard charges for medical services or treatments that are considered reasonable and customary within a specific area and are used as a basis for determining the amount of coverage provided by an insurance policy.

# Key Contacts



Benefit	Vendor	Phone Number	Email or Website
Workday			<a href="https://workday.richmond.edu">Workday.richmond.edu</a>
Medical & Pharmacy	Anthem/CarelonRx	844-614-3102	<a href="https://www.anthem.com">www.anthem.com</a>
Dental	Delta Dental	800-237-6060	<a href="https://www.deltadentalva.com">www.deltadentalva.com</a>
Vision	Anthem	844-614-3102	<a href="https://www.anthem.com">www.anthem.com</a>
Health Savings Account	Health Equity	866-346-5800	<a href="https://www.healthequity.com">www.healthequity.com</a>
Flexible Spending Accounts	Health Equity	866-346-5800	<a href="https://www.healthequity.com">www.healthequity.com</a>
Group Life and AD&D Voluntary Life Short-Term Disability Long-Term Disability	New York Life	800-362-4462	<a href="https://www.mynylgbs.com">www.mynylgbs.com</a>
Voluntary Accident Voluntary Hospital	Cigna	800-754-3207	<a href="https://www.cigna.com">www.cigna.com</a>
Employee Assistance Program	Anthem	855-873-4932	<a href="https://www.anthem.com/EAP">Anthem.com/EAP</a> Log in using: University of Richmond
Health Advocate	Health Advocate	866-695-8622	<a href="https://www.healthadvocate.com">www.healthadvocate.com</a>
Fertility	WINFertility	877-434-7063	<a href="https://managed.winfertility.com/Richmond">Managed.winfertility.com/Richmond</a>
Legal Services Plan	Legal Resources	800-728-5768	<a href="https://www.legalresources.com">www.legalresources.com</a>
403(b) Retirement Plan	TIAA	800-842-2776	<a href="https://www.tiaa.org/public/tcm/richmond">https://www.tiaa.org/public/tcm/richmond</a>
HR Solutions Center	University of Richmond	804-289-8747	<a href="mailto:urhr@richmond.edu">urhr@richmond.edu</a> <a href="https://hr.richmond.edu">hr.richmond.edu</a>

## University of Richmond Health and Welfare Benefits Annual Notices

Enclosed is a packet of notices and disclosures that pertain to your employer-sponsored health and welfare plans, as required by federal law for the 2026 plan year.

Enclosures:

- Medicare Part D Creditable Coverage Notice
- HIPAA Special Enrollment Rights Notice
- Women's Health Cancer Rights Act (WHCRA) Notice
- Newborns' Mothers Health Protection Act (NMHPA) Notice
- HIPAA Notice of Privacy Practices
- HIPAA Wellness Program Reasonable Alternative Standards (RAS) Notice
- EEOC Wellness Program Notice
- Children's Health Insurance Program (CHIP) Notice

University of Richmond herein be referred to as "Employer"

Anthem will herein be referred to as "Medical Plan(s)"

Laura Dietrick will herein be referred to as "Plan Administrator"

You can contact your Plan Administrator at [ldietric@richmond.edu](mailto:ldietric@richmond.edu).

### MEDICARE PART D CREDITABLE COVERAGE NOTICE

#### Important Notice From Your Employer About Your Prescription Drug Coverage And Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with your Employer and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. Your employer has determined that the prescription drug coverage offered by the Medical Plan(or plans) is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

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#### When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15<sup>th</sup> to December 7<sup>th</sup>. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

#### What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan while enrolled in the Employer's coverage as an active employee, please note that your Employer coverage will be the primary payer for your prescription drug benefits and Medicare will pay secondary. As a result, the value of your Medicare prescription drug benefits may be significantly reduced.

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Medicare will usually pay primary for your prescription drug benefits if you participate in your Employer's coverage as a former employee.

You may also choose to drop your Employer's coverage. If you do decide to join a Medicare drug plan and drop your current Employer's coverage, be aware that you and your dependents may not be able to get this coverage back.

## When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with your Employer and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information About This Notice Or Your Current Prescription Drug Coverage...

Contact the person listed below for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through your Employer changes. You also may request a copy of this notice at any time.

## For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit [www.medicare.gov](http://www.medicare.gov)
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call +1-800-MEDICARE (+1800-633-4227). TTY users should call +1877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at +1800-772-1213 (TTY +1800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date:	10/1/2025
Name of Entity/Sender:	University of Richmond
Contact--Position/Office:	Director of Benefits and Employee Well-Being
Address:	Human Resources, 231 Richmond Way, University of Richmond, 23173
Phone Number:	804-289-8747

## HIPAA SPECIAL ENROLLMENT RIGHTS NOTICE

If you are declining enrollment in your Employer's group health coverage for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or

## IMPORTANT NOTICES

if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 30 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

Finally, you and/or your dependents may have special enrollment rights if coverage is lost under Medicaid or a State health insurance ("CHIP") program, or when you and/or your dependents gain eligibility for state premium assistance. You have 60 days from the occurrence of one of these events to notify the company and enroll in the plan.

To request special enrollment or obtain more information, contact your plan administrator.

### **WOMEN'S HEALTH CANCER RIGHTS ACT (WHCRA) NOTICE**

Do you know that your Plan, as required by the Women's Health and Cancer Rights Act of 1998 (WHCRA), provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema?

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. If you would like more information on WHCRA benefits, contact your plan administrator.

### **NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT (NMHPA) NOTICE**

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

### **HIPAA NOTICE OF AVAILABILITY OF NOTICE OF PRIVACY PRACTICES**

The Employer's Group Health Plan maintains a Notice of Privacy Practices that provides information to individuals whose protected health information (PHI) will be used or maintained by the Plan. If you would like a copy of the Plan's Notice of Privacy Practices, please contact your Plan Administrator.

### **HIPAA WELLNESS PROGRAM REASONABLE ALTERNATIVE STANDARDS NOTICE**

Your group health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all eligible employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact your Plan Administrator and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

### **EEOC WELLNESS PROGRAM NOTICE**

#### **Notice Regarding Wellness Program**

URWell will herein be referred to as "Wellness Program"

# IMPORTANT NOTICES

Your Wellness Program is a voluntary wellness program available to all employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a voluntary health risk assessment or "HRA" that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You will also be asked to complete a biometric screening, which will include a blood test. You are not required to complete the HRA or to participate in the blood test or other medical examinations.

However, employees who choose to participate in the wellness program will receive a Wellness incentive. Although you are not required to complete the HRA or participate in the biometric screening, only employees who do so will receive the Wellness Incentive.

Additional incentives may be available for employees who participate in certain health-related activities or achieve certain health outcomes. If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting your Plan Administrator.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks and may also be used to offer you services through the wellness program. You also are encouraged to share your results or concerns with your own doctor.

## Protections From Disclosure Of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and University of Richmond may use aggregate information it collects to design a program based on identified health risks in the workplace, Your Wellness Program will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information is (are) a registered nurse, a doctor, or a health coach in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

# IMPORTANT NOTICES

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact your Plan Administrator.

## 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 your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit [www.healthcare.gov](http://www.healthcare.gov).

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **+1-877-KIDS NOW** or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at [www.askebsa.dol.gov](http://www.askebsa.dol.gov) or call **+1-866-444-EBSA (3272)**.

**If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2025. Contact your State for more information on eligibility –**

<b>ALABAMA – Medicaid</b> Website: <a href="http://myalhipp.com/">http://myalhipp.com/</a> Phone: +1-855-692-5447	<b>ALASKA – Medicaid</b> The AK Health Insurance Premium Payment Program Website: <a href="http://myakhipp.com/">http://myakhipp.com/</a> Phone: +1-866-25*1-4861 Email: <a href="mailto:CustomerService@MyAKHIPP.com">CustomerService@MyAKHIPP.com</a> Medicaid Eligibility: <a href="https://health.alaska.gov/dpa/Pages/default.aspx">https://health.alaska.gov/dpa/Pages/default.aspx</a>
<b>ARKANSAS – Medicaid</b> Website: <a href="http://myarhipp.com/">http://myarhipp.com/</a> Phone: +1-855-MyARHIPP (855-692-7447)	<b>CALIFORNIA – Medicaid</b> Health Insurance Premium Payment (HIPP) Program Website: <a href="http://dhcs.ca.gov/hipp">http://dhcs.ca.gov/hipp</a> Phone: 916-445-8322 Fax: 916-440-5676 Email: <a href="mailto:hipp@dhcs.ca.gov">hipp@dhcs.ca.gov</a>
<b>COLORADO – Health First Colorado (Colorado's Medicaid Program) &amp; Child Health Plan Plus (CHP+)</b> Health First Colorado Website: <a href="https://www.healthfirstcolorado.com/">https://www.healthfirstcolorado.com/</a> Health First Colorado Member Contact Center: +1-800-22*1-3943/State Relay 711 CHP+: <a href="https://hcpf.colorado.gov/child-health-plan-plus">https://hcpf.colorado.gov/child-health-plan-plus</a> CHP+ Customer Service: +1-800-359-1991/State Relay 711 Health Insurance Buy-In Program (HIBI): <a href="https://www.mycohibi.com/">https://www.mycohibi.com/</a> HIBI Customer Service: +1-855-692-6442	<b>FLORIDA – Medicaid</b> Website: <a href="https://www.flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp/index.html">https://www.flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp/index.html</a> Phone: +1-877-357-3268
<b>GEORGIA – Medicaid</b>	<b>INDIANA – Medicaid</b>

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<p>GA HIPP Website: <a href="https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp">https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp</a>            Phone: 678-564-1162, Press 1            GA CHIPRA Website:  <a href="https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra">https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra</a>            Phone: 678-564-1162, Press 2</p>	<p>Health Insurance Premium Payment Program            All other Medicaid            Website: <a href="https://www.in.gov/medicaid/">https://www.in.gov/medicaid/</a>  <a href="http://www.in.gov/fssa/dfr/">http://www.in.gov/fssa/dfr/</a>            Family and Social Services Administration            Phone: +1-800-403-0864            Member Services Phone: +1-800-457-4584</p>
<p>IOWA – Medicaid and CHIP (Hawki)</p>	<p>KANSAS – Medicaid</p>
<p>Medicaid Website:  <a href="#">Iowa Medicaid   Health &amp; Human Services</a>            Medicaid Phone: +1-800-338-8366            Hawki Website:  <a href="#">Hawki - Healthy and Well Kids in Iowa   Health &amp; Human Services</a>            Hawki Phone: +1-800-257-8563            HIPP Website: <a href="#">Health Insurance Premium Payment (HIPP)   Health &amp; Human Services (iowa.gov)</a>            HIPP Phone: +1-888-346-9562</p>	<p>Website: <a href="https://www.kancare.ks.gov/">https://www.kancare.ks.gov/</a>            Phone: +1-800-792-4884            HIPP Phone: +1-800-967-4660</p>
<p>KENTUCKY – Medicaid</p>	<p>LOUISIANA – Medicaid</p>
<p>Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website:  <a href="https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx">https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx</a>            Phone: +1-855-459-6328            Email: <a href="mailto:KIHIPPPROGRAM@ky.gov">KIHIPPPROGRAM@ky.gov</a>            KCHIP Website: <a href="https://kynect.ky.gov">https://kynect.ky.gov</a>            Phone: +1-877-524-4718            Kentucky Medicaid Website:  <a href="https://chfs.ky.gov/agencies/dms">https://chfs.ky.gov/agencies/dms</a></p>	<p>Website: <a href="http://www.medicicaid.la.gov">www.medicicaid.la.gov</a> or <a href="http://www.ldh.la.gov/lahipp">www.ldh.la.gov/lahipp</a>            Phone: +1-888-342-6207 (Medicaid hotline) or +1-855-618-5488 (LaHIPP)</p>
<p>MAINE – Medicaid</p>	<p>MASSACHUSETTS – Medicaid and CHIP</p>
<p>Enrollment Website:  <a href="https://www.mymaineconnection.gov/benefits/s/?language=en_US">https://www.mymaineconnection.gov/benefits/s/?language=en_US</a>            Phone: +1-800-442-6003            TTY: Maine relay 711            Private Health Insurance Premium Webpage:  <a href="https://www.maine.gov/dhhs/ofi/applications-forms">https://www.maine.gov/dhhs/ofi/applications-forms</a>            Phone: +1-800-977-6740            TTY: Maine relay 711</p>	<p>Website: <a href="https://www.mass.gov/masshealth/pa">https://www.mass.gov/masshealth/pa</a>            Phone: +1-800-862-4840            TTY: 711            Email: <a href="mailto:masspremassistance@accenture.com">masspremassistance@accenture.com</a></p>
<p>MINNESOTA – Medicaid</p>	<p>MISSOURI – Medicaid</p>
<p>Website:  <a href="https://mn.gov/dhs/health-care-coverage/">https://mn.gov/dhs/health-care-coverage/</a>            Phone: +1-800-657-3672</p>	<p>Website:  <a href="http://www.dss.mo.gov/mhd/participants/pages/hipp.htm">http://www.dss.mo.gov/mhd/participants/pages/hipp.htm</a>            Phone: 573-75+1-2005</p>
<p>MONTANA – Medicaid</p>	<p>NEBRASKA – Medicaid</p>
<p>Website:  <a href="http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP">http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP</a>            Phone: +1-800-694-3084            Email: <a href="mailto:HSHIPPPProgram@mt.gov">HSHIPPPProgram@mt.gov</a></p>	<p>Website: <a href="http://www.ACCESSNebraska.ne.gov">http://www.ACCESSNebraska.ne.gov</a>            Phone: +1-855-632-7633            Lincoln: 402-473-7000            Omaha: 402-595-1178</p>
<p>NEVADA – Medicaid</p>	<p>NEW HAMPSHIRE – Medicaid</p>
<p>Medicaid Website: <a href="http://dhcfp.nv.gov">http://dhcfp.nv.gov</a>            Medicaid Phone: +1-800-992-0900</p>	<p>Website: <a href="https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program">https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program</a>            Phone: 603-27+1-5218</p>

# IMPORTANT NOTICES

	Toll free number for the HIPP program: +1-800-852-3345, ext. 15218 Email: <a href="mailto:DHHS.ThirdPartyLiabi@dhhs.nh.gov">DHHS.ThirdPartyLiabi@dhhs.nh.gov</a>
<b>NEW JERSEY – Medicaid and CHIP</b>	<b>NEW YORK – Medicaid</b>
Medicaid Website: <a href="http://www.state.nj.us/humanservices/dmahs/clients/medicaid/">http://www.state.nj.us/humanservices/dmahs/clients/medicaid/</a> Phone: +1-800-356-1561 CHIP Premium Assistance Phone: 609-63+1-2392 CHIP Website: <a href="http://www.njfamilycare.org/index.html">http://www.njfamilycare.org/index.html</a> CHIP Phone: +1-800-70+1-0710 (TTY: 711)	Website: <a href="https://www.health.ny.gov/health_care/medicaid/">https://www.health.ny.gov/health_care/medicaid/</a> Phone: +1-800-54+1-2831
<b>NORTH CAROLINA – Medicaid</b>	<b>NORTH DAKOTA – Medicaid</b>
Website: <a href="https://medicaid.ncdhhs.gov/">https://medicaid.ncdhhs.gov/</a> Phone: 919-855-4100	Website: <a href="https://www.hhs.nd.gov/healthcare">https://www.hhs.nd.gov/healthcare</a> Phone: +1-844-854-4825
<b>OKLAHOMA – Medicaid and CHIP</b>	<b>OREGON – Medicaid and CHIP</b>
Website: <a href="http://www.insureoklahoma.org">http://www.insureoklahoma.org</a> Phone: +1-888-365-3742	Website: <a href="http://healthcare.oregon.gov/Pages/index.aspx">http://healthcare.oregon.gov/Pages/index.aspx</a> Phone: +1-800-699-9075
<b>PENNSYLVANIA – Medicaid and CHIP</b>	<b>RHODE ISLAND – Medicaid and CHIP</b>
Website: <a href="https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html">https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html</a> Phone: +1-800-692-7462 CHIP Website: <a href="http://www.pa.gov">Children's Health Insurance Program (CHIP) (pa.gov)</a> CHIP Phone: +1-800-986-KIDS (5437)	Website: <a href="http://www.eohhs.ri.gov/">http://www.eohhs.ri.gov/</a> Phone: +1-855-697-4347, or 40+1-462-0311 (Direct Rlte Share Line)
<b>SOUTH CAROLINA – Medicaid</b>	<b>SOUTH DAKOTA - Medicaid</b>
Website: <a href="https://www.scdhhs.gov">https://www.scdhhs.gov</a> Phone: +1-888-549-0820	Website: <a href="http://dss.sd.gov">http://dss.sd.gov</a> Phone: +1-888-828-0059
<b>TEXAS – Medicaid</b>	<b>UTAH – Medicaid and CHIP</b>
Website: <a href="http://www.texas.gov">Health Insurance Premium Payment (HIPP) Program   Texas Health and Human Services</a> Phone: +1-800-440-0493	Utah's Premium Partnership for Health Insurance (UPP) Website: <a href="https://medicaid.utah.gov/upp/">https://medicaid.utah.gov/upp/</a> Email: <a href="mailto:upp@utah.gov">upp@utah.gov</a> Phone: +1-888-222-2542 Adult Expansion Website: <a href="https://medicaid.utah.gov/expansion/">https://medicaid.utah.gov/expansion/</a> Utah Medicaid Buyout Program Website: <a href="https://medicaid.utah.gov/buyout-program/">https://medicaid.utah.gov/buyout-program/</a> CHIP Website: <a href="https://chip.utah.gov/">https://chip.utah.gov/</a>
<b>VERMONT– Medicaid</b>	<b>VIRGINIA – Medicaid and CHIP</b>
Website: <a href="http://www.vermont.gov">Health Insurance Premium Payment (HIPP) Program   Department of Vermont Health Access</a> Phone: +1-800-250-8427	Website: <a href="https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select">https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select</a> <a href="https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs">https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs</a> Medicaid/CHIP Phone: +1-800-432-5924
<b>WASHINGTON – Medicaid</b>	<b>WEST VIRGINIA – Medicaid and CHIP</b>
Website: <a href="https://www.hca.wa.gov/">https://www.hca.wa.gov/</a> Phone: +1-800-562-3022	Website: <a href="https://dhhr.wv.gov/bms/">https://dhhr.wv.gov/bms/</a> <a href="http://mywvhipp.com/">http://mywvhipp.com/</a> Medicaid Phone: 304-558-1700 CHIP Toll-free phone: +1-855-MyWVHIPP (+1-855-699-8447)
<b>WISCONSIN – Medicaid and CHIP</b>	<b>WYOMING – Medicaid</b>

# IMPORTANT NOTICES

Website:

<https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm>

Phone: +1-800-362-3002

Website:

<https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/>

Phone: +1-800-251-1269

To see if any other states have added a premium assistance program since July 31, 2025, or for more information on special enrollment rights, contact either:

U.S. Department of Labor  
Employee Benefits Security Administration  
[www.dol.gov/agencies/ebsa](http://www.dol.gov/agencies/ebsa)  
+1-866-444-EBSA (3272)

U.S. Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
[www.cms.hhs.gov](http://www.cms.hhs.gov)  
+1-877-267-2323, Menu Option 4, Ext. 61565



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