

THE UNIVERSITY OF IOWA

2022 ANNUAL BENEFITS & ENROLLMENT GUIDE FACULTY & STAFF

ANNUAL ENROLLMENT: NOV. 1 – NOV. 15, 2021

TABLE OF CONTENTS

3	Pre-enrollment Checklist
4	Eligibility & Coverage Information
6	Health Insurance
12	Dental Insurance
14	Flexible Spending Accounts
15	Life Insurance
16	Accidental Death & Dismemberment Insurance
17	Voluntary Programs & Discounts
18	University Credits
19	Enrollment Tips & Instructions

ABOUT THIS GUIDE: The benefits information presented in this book describes only the highlights of the plans and does not constitute official plan documents. Additional terms and conditions apply. If there are any discrepancies between the information contained herein and the official plan documents, the plan documents will govern.

ANNUAL BENEFITS OPEN ENROLLMENT IS HERE

Each year, University of Iowa faculty and staff have the opportunity to choose and make changes to their benefits during the Annual Benefits Open Enrollment period. This year's enrollment period is Nov. 1 – Nov. 15, 2021. From medical and dental plans, to life insurance, flexible spending accounts and more, now is the time to review your benefits and select the options that fit you and your family best.

Here are some essential things you need to know:

Key dates:

- Open enrollment November 1 – November 15, 2021
- Enrollment closes November 15, 2021 at 5:00 p.m. CST
- New benefits effective January 1, 2022

Before you choose:

Before making your benefit elections, be sure to review this guide. It outlines each plan and the costs per month. It will also walk you through the decision-making and enrollment processes step-by-step.

If you don't enroll:

Your current elections will continue with the exception of your flexible spending account (FSA). If you wish to have an FSA in the coming year, you must re-enroll during the open enrollment period. Learn more on page 12.

QUESTIONS?

Your Benefits Office is here to help. Call 319-335-2676 or 877-830-4001 during business hours, or email benefits@uiowa.edu. You can also visit our website <https://hr.uiowa.edu/benefits> to learn more about your benefit options and to get help selecting the plans that are right for you.

PRE-ENROLLMENT CHECKLIST

When it comes to Annual Benefits Open Enrollment, there's a lot to think about. Use this checklist to help you make benefit decisions that are right for you and your family.

1. Think about your health care needs. Are you considering any significant life changes, like starting a family? Do you or any family members have medical procedures coming up? Do you have any new health conditions, or are you taking new medications? All of these can affect which health insurance plan you choose.
2. Decide if you will re-enroll in your flexible spending account (FSA). If you wish to participate in an FSA for 2022, you must log in and complete your enrollment. Your 2021 FSA election(s) will not carry over.
3. If you are adding a new dependent, gather their personal information. To make enrolling your dependent quick and easy, have their Social Security number, birthdate and other general information on hand.
4. Enroll online by 5 p.m. on Nov. 15, 2021. Log in to Employee Self Service to enroll. Missing the enrollment deadline means that you can't enroll or make changes to your benefits until the end of 2022, unless you have a qualifying event. Learn about qualifying events on page 4.
5. Confirm your elections. Carefully review the confirmation statements you receive through Employee Self Service. Submit any changes or corrections before Nov. 24, 2021.

Sign up for a virtual benefits counseling meeting at
<https://hr.uiowa.edu/benefits/open-enroll-2022>

Get step-by-step enrollment instructions on page 17.

ELIGIBILITY & COVERAGE INFORMATION

ELIGIBILITY

In general, regular faculty and staff with at least a 50 percent appointment and their eligible dependents may participate in the benefits described in this guide. Note that there may be tax implications when covering adult children who are over age 26. LEARN MORE at <https://hr.uiowa.edu/benefits/benefits-overview/eligibility>

Eligible dependents:

- Same- or opposite-sex legal spouse
- Same- or opposite-sex common-law spouse (affidavit required)
- Same- or opposite-sex domestic partner (affidavit required)
- Child up to the end of the year in which they turn age 26
- Child age 26 or older who is enrolled in an accredited educational institution as a full-time student
- Unmarried child who is deemed disabled. The disability must have existed before the child turned 26 or while the child was a full-time student, and they must meet the following criteria:
 - Claimed as a dependent on your tax return; and
 - Enrolled in and receiving Medicare benefits due to disability; or
 - Enrolled in and receiving Social Security benefits due to disability.

Children you may cover:

A child is defined as:

- Natural child
- Stepchild or domestic partner's child
- Legally adopted child or child placed in your home for adoption
- Foster child
- Child for whom you have legal guardianship
- Natural child for whom a court orders coverage

Eligible children may be covered through Dec. 31 of the year in which they reach age 26 without tax implications. Coverage for children who are full-time students or disabled can continue as long as they continue in that status; however, there are tax implications for those who do not qualify as tax dependents per IRS rules.

INFORMATION AND DOCUMENTATION REQUIREMENTS

1. If you enroll new family members, some basic information is required (names, dates of birth, Social Security numbers).
2. Following your enrollment, you will be contacted by University Benefits and required to confirm the dependents you have enrolled meet the eligibility guidelines by providing documentation to verify eligibility (birth certificates, marriage certificates, tax forms). Enrollment status will be pending until all required information is received.

QUALIFYING EVENTS

You may only make changes to your benefits outside of the enrollment period if you have a qualifying event: a significant life change that allows you to enroll in or update your benefits. Changes permitted are limited to those consistent with the reason for the change. LEARN MORE at <https://hr.uiowa.edu/benefits/benefits-overview/changing-benefits>.

- Birth/adoption
- Death of a spouse/dependent/domestic partner
- Marriage/domestic partner affidavit
- Divorce/legal separation/termination of a domestic partner agreement
- Gain or loss of health/dental insurance coverage
- Entitlement to, or loss of eligibility for, Medicare/Medicaid/SCHIP for employee or dependent
- Approved leave of absence
- Dependent over age 26 no longer eligible
- Dependent over age 26 returning to school full time

Additional events may allow for changes to a dependent care flexible spending account.

NOTE: The University of Iowa reserves the right to require documentation to substantiate a dependent's eligibility status at any time.

If you miss the Nov. 15 deadline, you cannot enroll in benefits, change your benefits or add or remove dependents without a qualifying event or until the next annual enrollment period in Nov. 2022.

HEALTH INSURANCE

Administered by Wellmark® Blue Cross® and Blue Shield®

You have the choice of two health plans: UISelect and UIChoice. On both plans, you'll pay significantly less for care if you choose doctors and hospitals on a lower provider level. (For example, all UI health care providers are on Level 1, making it your most affordable option.) You do not need to pick a provider level when selecting coverage.

To locate in-network providers near you, visit wellmark.com/finder.

UI SELECT

This plan may be a good option if you and your family get your health care in the state of Iowa. If you are traveling out of state, only emergency care and care from Doctor On Demand® are covered.

- \$0 EMPLOYEE
- \$294 EMPLOYEE + SPOUSE
- \$239 EMPLOYEE + CHILDREN
- \$314 FAMILY
- \$0 DOUBLE SPOUSE + FAMILY

LEVEL 1: Includes University of Iowa Hospitals and affiliated clinics, UI Urgent Care, UI Quick Care, Washington County Hospitals and Clinics and The Iowa Clinic in Des Moines.

LEVEL 2: Providers from the Blue Access® network. Locally, Level 2 includes Mercy Hospital and most providers in and around Iowa City who are not in Level 1.

LEVEL 3: Not covered. Exceptions include emergencies or care with a Wellmark-approved out-of-network referral. (Dependent children attending college, long-term travelers, and families living apart may be covered through guest membership.)

UI CHOICE

With this plan, you can see health care providers in Iowa and across the nation. However, you'll pay less for care when you choose in-state doctors and hospitals on lower levels.

- \$77 EMPLOYEE
- \$367 EMPLOYEE + SPOUSE
- \$299 EMPLOYEE + CHILDREN
- \$393 FAMILY
- \$196 DOUBLE SPOUSE + FAMILY

LEVEL 1: Includes University of Iowa Hospitals and affiliated clinics, UI Urgent Care, UI Quick Care, Washington County Hospitals and Clinics and The Iowa Clinic in Des Moines.

LEVEL 2: Providers from the Blue Choice® network. Locally, Level 2 includes Mercy Hospital and most providers in and around Iowa City who are not in Level 1.

LEVEL 3: Providers from the BlueCard® network. BlueCard providers are readily available throughout the U.S. and around the globe.

HEALTH COSTS

UI SELECT

ANNUAL DEDUCTIBLE

LEVEL 1: Employee \$400; family: \$800

LEVEL 2: Employee \$800; family \$1,600

INPATIENT CARE DEDUCTIBLE (SEMI-PRIVATE ROOM)

See deductible

COINSURANCE

LEVEL 1: 15%

LEVEL 2: 25%

ANNUAL OUT-OF-POCKET MAXIMUM (OPM)

Levels 1 & 2 participating providers combined

LEVEL 1: Employee \$2,000; family \$3,400

LEVEL 2: Employee \$3,000; family \$6,000

PREVENTIVE CARE

Includes preventive exams, gynecological exams, immunizations, mammograms, and well-child care

LEVELS 1 & 2: \$0 copay. Not subject to deductible.

DOCTOR ON DEMAND (MENTAL HEALTH VISITS ARE NOT COVERED)

LEVELS 1 & 2: \$0 copay

UI QUICK CARE

LEVEL 1: \$5 copay

LEVEL 2: N/A

OFFICE VISIT

LEVEL 1: Primary care \$10 copay; specialist \$20 copay

LEVEL 2: Primary care \$35 copay; specialist \$50 copay

URGENT CARE VISIT

LEVEL 1: \$10 copay

LEVEL 2: \$35 copay

ER VISIT

Copay waived if admitted

LEVEL 1: \$100 copay followed by 10% coinsurance

LEVEL 2: \$100 copay followed by 10% coinsurance (INCLUDES OUT-OF-STATE ER VISITS)

MENTAL HEALTH CARE VISIT

LEVELS 1 & 2: \$10 copay

UI CHOICE

ANNUAL DEDUCTIBLE

LEVELS 1, 2 & 3: N/A. Deductible for inpatient hospital care only.
See annual inpatient care deductible below.

INPATIENT CARE DEDUCTIBLE (SEMI-PRIVATE ROOM)

LEVEL 1: \$400 deductible followed by 10% coinsurance (PER ADMISSION)
LEVEL 2: \$600 deductible followed by 10% coinsurance (PER ADMISSION)
LEVEL 3: \$800 deductible followed by 40% coinsurance (PER ADMISSION)

COINSURANCE

LEVEL 1: 10%
LEVEL 2: 20%
LEVEL 3: Varies based on location and service

ANNUAL OUT-OF-POCKET MAXIMUM (OPM)

Levels 1, 2, and 3: BlueCard participating providers combined. Employee \$1,700; family \$3,400
LEVELS 1 & 2: Non-participating providers N/A
LEVEL 3: Non-participating providers Employee \$2,000; family \$4,000

PREVENTIVE CARE

Includes preventive exams, gynecological exams, immunizations, mammograms, and well-child care
LEVELS 1 & 2: \$0 copay.
LEVEL 3: Participating providers 0% copay. Non-participating providers outpatient 40% coinsurance; in office 50% coinsurance. Coinsurance waived for out-of-network immunizations & well-child care.

DOCTOR ON DEMAND (MENTAL HEALTH VISITS ARE NOT COVERED)

LEVELS 1, 2 & 3: \$0 copay

UI QUICK CARE

LEVEL 1: \$5 copay
LEVELS 2 & 3: N/A

OFFICE VISIT

LEVEL 1: \$10 copay
LEVEL 2: \$25 copay
LEVEL 3: 50% coinsurance

URGENT CARE VISIT

LEVEL 1: \$10 copay
LEVEL 2: \$25 copay
LEVEL 3: 50% coinsurance

ER VISIT

Copay waived if admitted
LEVELS 1, 2 & 3: \$100 copay followed by 10% coinsurance

MENTAL HEALTH CARE VISIT

LEVELS 1 & 2: \$0 copay

LEVEL 3: 50% coinsurance

PHARMACY COSTS

UI SELECT - BLUE RX VALUE PLUSSM

TIER 1 (Generic drugs): \$0 copay

TIER 2 (name-brand drugs): 30% coinsurance

TIER 3 (name-brand, non-formulary drugs): 50% coinsurance

TIER 4 (Name-brand, non-formulary drugs): N/A

PHARMACY ANNUAL OUT-OF-POCKET MAXIMUM: Employee: \$1,100;
Family: \$2,200

UI CHOICE - BLUE RX COMPLETESM

TIER 1 (Generic drugs): \$0 copay

TIER 2 (name-brand drugs): 30% coinsurance

TIER 3 (name-brand, non-formulary drugs): 50% coinsurance

TIER 4 (Name-brand, non-formulary drugs): 50% coinsurance

PHARMACY ANNUAL OUT-OF-POCKET MAXIMUM: Employee: \$1,100;
Family: \$2,200

DENTAL INSURANCE

Administered by Delta Dental of Iowa

On the Dental II plan, all providers are divided into three tiers. While you may see any provider you wish, you'll pay significantly less for care if you choose a provider on a lower tier. You do not need to pick a tier when selecting coverage. To find the tier of your provider, visit deltadentalia.com.

Tier 1: Providers in the Delta Dental PPO network.

Tier 2: Providers in the Delta Dental Premier network.

Tier 3: All providers who do not participate with Delta Dental.

DENTAL INSURANCE MONTHLY PREMIUMS

- \$0 EMPLOYEE
- \$19 EMPLOYEE + SPOUSE
- \$20 EMPLOYEE + CHILDREN
- \$27 FAMILY
- \$0 DOUBLE SPOUSE + FAMILY

DEDUCTIBLE

Tier 1: \$0

Tier 2: \$0

Tier 3: \$0

COINSURANCE

Diagnostic & preventive care

Two visits per year, per member. Includes routine exam, teeth cleaning, X-rays. Amount paid by insurance does not count toward \$2,000 maximum benefit.

Tier 1: 0%

Tier 2: 0%

Tier 3: 0%

Routine & restorative care

Includes regular cavity fillings, emergency treatment for the relief of pain, routine oral surgery, anesthesia, tooth extractions.

Tier 1: 0%

Tier 2: 20%

Tier 3: 20%

Prosthesis, endodontics & periodontal services

Includes bridges, partial & complete dentures, root canals, crowns, implants.

Tier 1: 10%

Tier 2: 20%

Tier 3: 20%

Orthodontics

Tier 1: 50%

Tier 2: 50%

Tier 3: 50%

Maximum annual benefit

All Tiers: \$2,000 per member per year; up to \$4,000 with annual carryover.

FLEXIBLE SPENDING ACCOUNTS (FSAs)

With a flexible spending account (FSA), you can set aside pre-tax dollars to pay for certain qualified expenses. You can choose to contribute to a health care FSA, a dependent care FSA or both.

HEALTH CARE FSA: Contribute up to \$2,750 annually per employee. This benefit allows you to be reimbursed for qualified medical expenses.

DEPENDENT CARE FSA: Contribute up to \$5,000 annually per household. If you are married and filing separately, you may contribute up to \$2,500 each.

This benefit allows you to be reimbursed for eligible child and adult-dependent care expenses. This includes but is not limited to: daycare, preschool and afterschool care for children under 13, and daytime and elder care for adults with disabilities.

IMPORTANT THINGS TO KNOW ABOUT FSAs

Remember, your flexible spending account elections do not carry over from year to year. You must enroll each year to participate.

- Funds must be used for qualified expenses incurred between Jan. 1–Dec. 31, 2022.
- You may file for reimbursement at any time during the year but no later than April 30, 2023.
- FSAs are “use it or lose it” accounts. This means you forfeit any money remaining in your account after the April 30, 2023 deadline.
- Be sure to estimate your expenses carefully as changes cannot be made unless you have a qualifying event.
- Requests for reimbursement can be submitted through Employee Self Service. For payment, you must set up direct deposit for benefits spending accounts. You can do this on Employee Self Service under Payroll. Get the details at <https://hr.uiowa.edu/benefits/flexible-spending-accounts>.

LIFE INSURANCE

Administered by Principal Financial Group

Your benefits include a group life insurance plan paid for by the university. You also have the option to purchase additional term life insurance for yourself and your dependents. LEARN MORE at <https://hr.uiowa.edu/benefits/life-insurance>.

UNIVERSITY-PAID GROUP LIFE INSURANCE

This required benefit provides coverage options for regular faculty and staff members who hold a 50 percent time or greater appointment. The university funds 2 times your salary, up to the maximum coverage amount of \$400,000.

VOLUNTARY TERM LIFE INSURANCE FOR EMPLOYEES

This voluntary benefit can be purchased to complement any group life insurance option. You can select from a variety of coverage amounts; maximum coverage is \$1,000,000. Rates increase at ages 40, 50 and 60.

VOLUNTARY TERM LIFE INSURANCE FOR DEPENDENTS

Coverage for spouses, domestic partners and dependents is also available if you elect coverage for yourself under the voluntary term life insurance benefit. Your dependent's benefit amount cannot be more than 100 percent of your own. For example, if your salary is \$40,000 and you elect ½ times salary in voluntary term life for yourself you must elect \$20,000 or less in coverage for your spouse.

LIFE INSURANCE BENEFICIARIES

You will elect your beneficiaries when you enroll in life insurance, and you may change your beneficiaries at any time on the Employee Self Service site. Any change of beneficiary will not become effective until acknowledged and recorded by the university. For estate planning purposes, the designation of beneficiaries can be assigned to another party. The primary beneficiary for the spouse/domestic partner/dependent term life insurance will always be the employee. The contingent beneficiary will always be the insured's estate.

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE (AD&D)

Administered by Zurich Insurance Group

COVERAGE FOR EMPLOYEES AND FAMILIES

Accidental death and dismemberment insurance (AD&D) provides coverage at all times for most accidents that occur on or off the job, at home or away, anywhere in the world.

Coverage is available in \$100,000 increments up to a maximum of \$1,000,000 for:

- Plan 1 Employee only
- Plan 2 Employee & spouse/domestic partner (covered at 75% of your benefit)
- Plan 3 Employee & children (covered at 20% of your benefit up to \$100,000)
- Plan 4 Employee & family

Dependent children may be covered through the end of the year they turn 26. After turning 26, they may be covered if they are a full-time student or if they are disabled and the disability existed while they were a covered dependent.

Please note: Dual University of Iowa employed spouses/partners and dependents may not double insure each other or their dependents. You may only be included under this policy once.

LEARN MORE at <https://hr.uiowa.edu/benefits/other-insurance-benefits>.

VOLUNTARY INSURANCE PROGRAMS & DISCOUNTS

As a University of Iowa employee, you have the opportunity to purchase a variety of voluntary insurance products online at a discounted rate.

VOLUNTARY VISION INSURANCE

Administered by Two Rivers Insurance

Faculty and staff members may purchase vision insurance. The Vision Benefits Open Enrollment Period is Jan. 1–Feb. 28, with an effective date of April 1. YOU WILL RECEIVE AN EMAIL REMINDING YOU ABOUT THE VISION ANNUAL BENEFITS OPEN ENROLLMENT PERIOD. LEARN MORE at

<https://hr.uiowa.edu/benefits/other-insurance-benefits>.

OTHER VOLUNTARY INSURANCE PROGRAMS

- Accident insurance
- Critical illness/cancer insurance
- Short-term disability insurance
- Hospital indemnity insurance
- Long-term care insurance
- Auto insurance
- Homeowners/renters insurance
- Personal umbrella insurance
- Boat owner's insurance
- Recreational vehicle insurance

These supplementary plans can help round out your benefits package by helping with out-of-pocket costs in the case of a severe illness or injury, as well as with other high-dollar personal expenses. While offered at a discount, these plans contain no university contribution. They can be paid through payroll deduction on an after-tax basis only. In addition, these products cannot be included in the flexible benefits program, and you cannot use spending account funds to pay for the premiums. You may direct any questions about voluntary insurance products to the individual program administrators. LEARN MORE at

<https://hr.uiowa.edu/benefits/disability-and-other-insurance/other-voluntary-insurance-programs>.

UNIVERSITY CREDITS

Benefits-eligible faculty, professional & scientific and merit staff are eligible to receive a variety of University Credits based on the benefits they elect. House staff and temporary staff do not qualify for University Credits.

GENERAL BENEFIT CREDITS

Each benefits-eligible employee receives \$90 per month (up to \$1,080 a year) in General Benefit Credits. These credits may be used to reduce the cost of any pre-tax benefit, or to fund a flexible spending account. Unused credits automatically roll into a health care flexible spending account, or you can designate the funds to a dependent care flexible spending account during enrollment. (Learn how on page 18.)

SHARED SAVINGS CREDITS

Depending on your benefit choices, you may be eligible for additional benefit credits.

- Waiving university-offered dental insurance: If you waive dental insurance and are not enrolled in the University of Iowa dental insurance plan, you will receive a Shared Savings Credit (\$25 per month).
- Electing \$50,000 in group life insurance: If you elect \$50,000 in life insurance — and your base salary is greater than \$25,000 — you will receive a Shared Savings Credit (\$40 per month).

ADDITIONAL INFORMATION

- University Credits will appear under the Earnings section of your paycheck.
- You are not taxed on credits.
- Credits are not paid out as cash.

ENROLLMENT TIPS & INSTRUCTIONS

BEFORE YOU ENROLL

1. Make sure you've set up your Two-Step Login profile if you wish to enroll from home.
2. Gather personal information for each person you are enrolling (this includes full legal names, birth dates and Social Security numbers).
3. Have your HawkID or HealthCareID and your password ready.
 - If you have difficulty with your HawkID or password: Call 319-384-4357 or go to hawkid.uiowa.edu.
 - If you have difficulty with your HealthCareID or password: Call 319-356-0001 or go to <https://healthcareid.uiowa.edu/default.aspx>.

HOW TO ENROLL

When you're ready to go online and make your benefit elections, follow these steps.

1. Log in to Employee Self Service at hris.uiowa.edu.
2. Select *Benefits Enrollment* (You'll find it under *Benefits & Wellness*.)
3. Select *OPEN – Edit Your Benefit Elections* to begin your enrollment.
4. Review your beneficiaries and add dependents.
 - On the right, select *I agree - View & Update Dependents/Beneficiaries*. Enter the required information and select *Submit*. Select the *Return to Benefits Enrollment* button to continue with your elections.
5. Elect your benefits. Select *OPEN - Edit Your Benefit Elections*. On the left, select *I agree - Continue to Benefits Enrollment*.
6. Re-enroll in flexible spending accounts and designate remaining credits.
 - If you wish to contribute to a health care FSA or dependent care FSA in 2022, you must elect this benefit during enrollment, even if you had an FSA this past year. Your 2021 contributions will not carry forward to 2022 unless you have remaining credits.
 - Additional deduction of funds: Enter the amount you wish to contribute to your FSAs in 2022 in the corresponding boxes. Then, select *Recalculate* to see your Benefits Overview, including your monthly deductions.

If you have remaining University Credits, they will default to a health care FSA unless you indicate otherwise now.

- If you would like your credits to go into a health care FSA, enter 0 in the *Monthly Health Care Contribution* box.
- If you would like your remaining credits to go into a dependent care FSA, enter the amount of the credits you have remaining in the *Monthly Dependent Care Contribution* box.
- To calculate your remaining credits, select the blue *Recalculate* button and scroll up to your account overview. You may select the *Recalculate* button as many times as you wish.

7. Save your progress or complete your enrollment.
 - Review all your benefit selections. Then, select one of the following:
 - *Keep For Later*, if you need to come back to make adjustments. You must log back in to complete your benefit elections before enrollment ends on Nov. 15, 2021.
 - *Finish Enrollment*, if you have completed your selections.
 - Your final Benefits Overview will appear. If you are satisfied, select the *Continue – Finish Enrollment* button to submit to University Benefits.
8. **IMPORTANT: Wait for the Benefits Enrollment Results page.** When you see this page, it means you have successfully submitted your enrollment changes. If you do not see this page, University Benefits has not received your submission, and your benefits will not be updated for 2022.

NOTE: If you add a new dependent to your coverage, once your email notification arrives, you must submit documentation to verify eligibility. Review the full list of required documents as well as instructions for submitting them.

- You will receive an email from University Benefits when your Verify Dependent link is available in Employee Self Service.
- Select the link in Employee Self Service and upload the required documents. You must do this within four weeks of enrolling your new dependent, or they will be removed from your coverage and cannot be added without a qualifying event.

AFTER YOU ENROLL

These final steps will ensure you and your dependents are confirmed for coverage, and that you receive all the information necessary to take full advantage of your benefits.

1. If you haven't already, set up direct deposits for spending account reimbursements.
 - Under *Time and Pay*, select *Direct Deposit*. Then select *Benefits Spending Account* and enter your bank information. Repeat for each type of account. Note: To ensure your privacy, the direct deposit link now requires two-step confirmation.
2. Update your home and work addresses: under *My Self Service*, select *Address/Phone Change*.
3. Watch for your confirmation statement.
 - You will receive an email notifying you of your online confirmation statement within 24 to 48 hours of submitting your benefit selections. Please review this carefully. You will only have one week from the date of your statement to request any changes to your enrollment. Submit any changes before Nov. 24, 2021.
4. Gather the documents you need to complete the *Dependent Eligibility Verification* if you added new dependents to your benefits plan. An email will be sent to your University of Iowa account once your *Verify Dependents* link in *Employee Self Service* is available.

Federal law requires the University to broadly disseminate certain policies to faculty, staff and students on an annual basis. For a full list of federal notices, visit <https://hr.uiowa.edu/benefits/benefits-annual-federal-notices>.

The University of Iowa prohibits discrimination in employment, educational programs, and activities on the basis of race, creed, color, religion, national origin, age, sex, pregnancy, disability, genetic information, status as a U.S. veteran, service in the U.S. military, sexual orientation, gender identity, associational preferences, or any other classification that deprives the person of consideration as an individual. The university also affirms its commitment to providing equal opportunities and equal access to university facilities. For additional information on nondiscrimination policies, contact the Director, Office of Equal Opportunity and Diversity, the University of Iowa, 202 Jessup Hall, Iowa City, IA 52242-1316, 319-335-0705 (voice), 319-335-0697 (TDD), diversity@uiowa.edu.

Wellmark Blue Cross and Blue Shield of Iowa is an Independent Licensee of the Blue Cross and Blue Shield Association. Blue Cross®, Blue Shield®, the Cross and Shield symbols, Blue Access®, Blue Choice® and BlueCard® are registered marks, and Blue RxSM is a service mark, of the Blue Cross and Blue Shield Association, an association of Independent Blue Cross and Blue Shield Plans. Wellmark® is a registered mark of Wellmark, Inc. Doctor On Demand is a separate company providing an online telehealth solution for Wellmark members. Doctor On Demand® is a registered mark of Doctor On Demand, Inc.

B-2821534 10/21