The State of Iowa and Iowa State University recognize that employees have different needs. That is why the State of Iowa offers a benefit program that allows you to choose between different benefit options to design the benefit plan that’s right for you is offered.

This guide is designed to provide you with information about your options for plan year 2017. It will explain the enrollment process and serve as a resource for your benefits. It is a good idea to take some time and read this guide before beginning the open change process.

This guide is not a complete description of the State of Iowa and Iowa State University benefit plans. Nothing in this guide supersedes or changes any of the terms and conditions of any plan documents, insurance policies, contracts or other legal agreements. If the wording in this guide contradicts any plan documents, insurance policies, contracts or other legal agreements, the wording in the official document and agreements will govern.

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Welcome to the 2017 Open Change Period

Important Dates

♦ October 17, 2016 - After 9:00 a.m. Open Change Period begins and Participation Statement available for review in AccessPlus
♦ November 2, 2016 Connect Live Web Cast Event is offered 9:00 a.m. – 10:30 a.m., URL for the web cast event: https://connect-extension.iastate.edu/benefits. Event will be recorded and available on Benefits webpage Bulletin Board as soon as possible.
♦ November 18, 2016 - At 5:00 p.m. Open Change Period closes
♦ December 2, 2016 - After 9:00 a.m. Benefit Confirmation Statement will be available for review in AccessPlus
♦ December 16, 2016 - After 9:00 a.m. Final Benefit Statement view 2017 election in AccessPlus

What’s New for Benefits in 2017?

♦ No open enrollment for dental – allowed to drop coverage or dependents. Adding coverage with a qualifying life event should be done using the benefit change form, not through open change.
♦ Increase in out of pocket maximums – review comparison on pages 12 – 18
♦ Increase to medical premiums (Program 3 Plus and Iowa Select)
♦ Decrease to Delta Dental insurance premiums
♦ Decrease to Avesis Eyewear Discount Plan premiums with improved plan design
♦ Increase to Medical Flexible Spending account maximum

What Should I Do During Open Change?

♦ Review – check everyone who is insured and verify eligibility.
♦ Know Your Options - Review your current benefit elections early (see pages 7 - 10 instructions on Participation Statement).
♦ Be Accountable - Know and understand your benefit elections. You may not want to make any changes, but your current benefits may change each year due to other factors.
♦ Make Changes - Use AccessPlus.
  o If unable to enroll on AccessPlus, forms available on Benefit webpage or from Benefits Office (see pages 7 – 9 making changes instructions).
♦ Confirm Changes - Review the Benefit Confirmation Statement for accuracy following the open change period.
♦ Are you retiring prior to December 31? Please do not use AccesssPlus to make changes. Instead we ask that you set up an appointment to visit with a Benefits Consultant to discuss your options.

When Do Changes Made During Open Change Period Become Effective?

♦ January 1, 2017 - Medical and dental plan changes
♦ January 1, 2017 or the first of the month following approval, whichever is later for Group Term Basic or Voluntary Term Life Insurance elections
♦ January 1, 2017 - Health Care Flexible Spending and Dependent Care Assistance Program elections
♦ February 1, 2017 - Avesis Vision – Optional Eyewear Plan elections
What Else Should I Be Considering?

♦ Medicare A or B – it is important to notify the Benefits Team, if you, your spouse or a dependent becomes Medicare eligible.

♦ If you are a current Program 3 Plus or Iowa Select medical plan participant, have you looked at the Managed Care Medical Plan? Enrollment in Blue Access plan may be able to provide premium and plan costs savings to you.

♦ If your spouse is a State of Iowa employee, you should also look at the possible benefits of sharing a double spouse contract option for 2017. Remember, employees/dependents cannot have double coverage with two State/ISU plans.

♦ If family double spouse with an ISU Plan (Faculty, Professional & Scientific, Supervisory/Confidential Merit) employee, you should also look at those options for 2017. Contact Benefits Office for information.

♦ Open Change is a good time to review and update your life insurance beneficiary information. Updates are allowed anytime throughout the year.

♦ Do you participate in a Flexible Spending Account? We encourage you to evaluate medical and/or dependent care expenses you may expect to pay in 2017 and use a Flexible Spending Account to save tax dollars.

♦ Do you have voluntary term life insurance already? Are you aging up to a new price? Check your coverage or apply for coverage during the open change period.

♦ Are you saving enough for your retirement? Although changes are allowed year-round, this is a good time to review your retirement goals and evaluate additional options for saving for retirement by electing a voluntary Group Supplemental Retirement Account (GSRA). You have the option to save on a pre-tax basis or after-tax (Roth 403(b)) basis.
Access to benefit education is available:

On-Demand – Live Web Cast Event
To learn more about open change and benefit options, there will be a Connect event scheduled on Wednesday, November 2, 2016 from 9:00 a.m. – 10:30 a.m.

At the meeting time, simply enter this URL: http://connect.extension.iastate.edu/benefits. Then you will find yourself at a login page. Simply enter your name under the “Enter as a Guest” heading. Then click on “Enter Room”. The audio will be over your computer speakers, so make sure you have your volume on and turned up. Any time before the meeting you can visit the following URL to confirm your ability to connect to the Connect server: http://www.extension.iastate.edu/testconnect/.

If you are not able to attend the live event, the presentation will be recorded and the link will be available on the Benefit webpage Bulletin Board.

Appointment with Benefit Consultants
The Benefits Team is committed to providing opportunities for Non-Supervisory Merit (Non-Organized) employees to pick up forms and discuss the plans and changes for 2017.

The Benefits Team always encourages appointments year round. Appointments are especially important between October 17, 2016 and November 18, 2016.

Appointments will help us serve you quickly with little wait time. If you walk-in to see a Benefit Consultant, you may be asked to schedule an appointment.

PHONE: 515-294-4800 / 877-477-7425  
FAX: 515-294-8226  
E-MAIL: benefits@iastate.edu
Insurance Eligibility for Dependents

Eligible dependents that may enroll on insurance include:

- Legal spouse (same or opposite sex), if you complete and sign a “Declaration of Domestic Relationship” form.
- Domestic partner (same or opposite sex), if you complete and sign a “Declaration of Domestic Relationship” form and State of Iowa Relationship Affidavit. Imputed income may apply.*
- Natural child, legally adopted child, stepchild or foster child up to age 26 (provided they are not already covered under the plan as an employee or by another ISU or State of Iowa employee).
- Coverage can also continue beyond age 26 if a child is incapable of self-support because of a developmental or physical disability and was covered at the time of disability. Contact the insurance company for verification of disability requirements prior to the child’s 26th birthday.
- Unmarried children, age 26 or over, who are full-time students. Imputed income may apply.*
- If a dependent is enrolled in their employer’s plan, that plan must be their primary insurance.

*Notice Regarding Imputed Income:

If there is an additional benefit provided to the employee, or if adding a non-qualified dependent results in the reduction of taxable gross wages, there would be a requirement to impute income.

- Continuing medical or dental coverage for full time students over age 26, who do not meet the definition of a dependent under Federal and State tax laws.
- Insuring a domestic partner, who does not meet the definition under the Federal and/or State tax laws.

If you do not enroll dependents during this year’s open change period, you will have to wait for a qualifying event or until the next open change period to enroll them in available plans. Once you enroll them, you will not be able to drop their coverage until the next open change period, unless you have a qualifying event.

The assumption will be made that any dependent enrolled by the employee meets all conditions to be a valid member. Employees are responsible for reporting eligibility changes for any participant of their insurance policies within 30 days of an event.

As long as unmarried, adult children are full-time students at an accredited post-secondary institution, there is no age limit and those dependents may remain on their parent’s insurance policies.

Termination of adult children: coverage will term December 31 of the year the dependent reaches age 26.

Termination of unmarried, full-time student over age 26: coverage will term at the end of the month child marries or ends full time student status. Please report changes within 30 days to an ISU Benefits Consultant.
Termination of coverage for adult children examples:

- Child 25 or younger is added to insurance. On March 3rd the child turns 26 and is not a full-time student. If not a full-time student by December, Coverage would have to end on December 31 but could end earlier if there is an event that allows a change.
- Unmarried child 26 or older is a full-time student. Child graduates on May 15th and is not a full-time student. Coverage must terminate on May 31.
- Unmarried child 26 or older is a full-time student. The child marries in August, coverage must terminate on August 31.

There may be periodic verification notices for full-time students from Department of Administrative Services, Iowa State University or the insurance companies.

**Important Notice!** Carefully review all information on the people you insure during this Open Change period. Check social security numbers, dates of birth, and review all the available relationship terminology to be certain you have the correct designation for all dependents you insure. It is the employee’s responsibility to promptly contact the ISU Benefits Office to report events that change eligibility. Failure to provide accurate information may result in termination of coverage.

**Social Security Numbers Are Required for Dependent Medical & Dental Coverage**

If you enroll a spouse/partner and/or dependent children in the medical and/or dental plans, we need their Social Security numbers. Social Security numbers provide unique identifiers for your family that aid in processing enrollment information between the vendors and Iowa State University.

The IRS requires reporting information using the Social Security number or tax identification number of the plan member and each dependent.

If you have a newborn child while you are covered under your group health plan, you must notify us of the newborn’s social security number within six months of the child’s birth.

Federal and State law protects the privacy and security of your SSN. ISU will not disclose your SSN without your consent for any other purposes except as allowed by law. ISU is working to minimize the use of SSN’s within its business processes.

*If Medicare eligible, please provide your Medicare information to the ISU Benefits Office.*

Contact the Benefits Office if you have an indicator of “Invalid” under social security number and provide the correct social security number. If your family member is a foreign national, contact the Benefits Office to verify family member does not have a SSN.

Please call University Human Resources Service Center at 515-294-4800 or 877-477-7485 and ask for a Benefits Consultant to discuss any questions.
This is the time of year when you have the opportunity to think about what changes, if any, you would like to make to your benefits for 2017. You are responsible for knowing and understanding your benefits and knowing what you have elected for coverage. **You may make changes to your current benefits in the AccessPlus portal on the ISU webpage.**

You can make changes to the following benefits in AccessPlus:

- Dental Insurance Plan – allowed to remove coverage or dependents online.
- Medical Insurance Plans – allowed to change, add, or remove coverage or dependents online.
- Flexible Spending Accounts.
- Avesis Optional Eyewear Plan.
- Group Term (Basic) or Voluntary Term Life Insurance – only drop coverage online. To add or increase term life insurance, forms are required and underwriting approval from Principal Financial Group, see page 22.

**Reminder:** if on a double spouse contract:

- **Only** the contract holder’s AccessPlus “Who’s Insured Worksheet” should display who is insured on the plan.
- The spouse’s record should **not** display who is insured.
- If the contract holder is switching plans the contributing spouse must make the same plan change in AccessPlus.
- If ending the double spouse contract, both contracts must be changed.

**GET STARTED** – it’s as easy as…A. B. C.

Most employees may use their AccessPlus portal on the ISU webpage to review your current benefits or to make changes:

A. Go to [www.iastate.edu](http://www.iastate.edu), click on “AccessPlus” and enter your University ID or SSN and password

Click on AccessPlus, located on the top left side of the page: CyMail/Outlook/Blackboard/ ➔ AccessPlus

**Note:** AccessPlus will time-out after 30 minutes of inactivity. You must submit changes and receive confirmation prior to logging out of AccessPlus or your changes will not be recorded.

If you have any difficulty opening AccessPlus, call the AccessPlus help desk at 515-294-4000 to reset your password. If you have difficulty accessing your data once you are in AccessPlus, contact University Human Resources Service Center at 515-294-4800 or 877-477-7485 or e-mail them at [hrhelp@iastate.edu](mailto:hrhelp@iastate.edu).
B. Click on the “Employee Tab”

C. Click on the menu link, “Benefits Info” in AccessPlus.

✓ CLICK ON - “Benefit Statement”

- **Beginning at 9:00 a.m.** - you will examine your Participation Statement as it will provide the employee monthly share amounts by offering a side-by-side comparison between your current 2016 benefit enrollment as recorded on the payroll register and the new 2017 benefit enrollment, before any of your changes are made during open change period.
  - Some employees may not have participation statements. If this is the case for you, please contact the ISU Benefits Office.

✓ CLICK ON - “Non-Supr Merit”

- You will want to review the instructions in order to save time and confusion. These instructions will be shown after clicking on “Open Change Period Instructions”.
- Next you will want to review each person on your plan and verify the information is correct. You will have an opportunity to do this after clicking on - “Verify Who’s Insured”. This is where you will also add/remove dependents.
- Click on “Go To Benefit Action Page”
  - At this point you will be able to navigate through the system in order to make your benefit elections/changes.
  - You can click on “Calculate” to view how the changes will affect the premium.
  - Last you need to click on “Submit” to finalize the changes you made within the system. Please note: **If you do not calculate and submit, all changes will be lost. Also, changes may be lost when navigating between pages.**
Some actions, while allowed during Open Change Period cannot be accomplished through AccessPlus (in these cases we identified the situation). The forms are available on the Benefit web page under the “Non-Supervisory Merit (Organized)” link and click on “Open Change Period Information”; and then “Forms”. They may also be requested from the University Human Resources Service Center at 515-294-4800 / 877-477-7485.
  - Please note these forms are to be completed and returned to the Benefits Office.
**CONFIRM BENEFITS – Click on “Benefit Statement”**

The following bullets provide you with some guidance on the actions you will take within AccessPlus after Open Change Period, beginning at 9:00 a.m. on December 2nd. This is not a complete list and there are extensive instructions within AccessPlus.

- In AccessPlus on **December 2, 2016 after 9:00 a.m.**, review the 2017 Benefit Confirmation Statement in order to verify your benefit elections are accurate.
- **If correct, you do not need to do anything further.**
- **If there is an error**, you have a limited time to take action. Instructions outlining the steps you need to follow will be on the Benefit Confirmation Statement. **Please note: This action must be completed by December 9, 2016 at 5:00 p.m.**
- If the change was made with paper forms, the change form copy you keep will be needed to support any corrections to the Benefit Confirmation Statement.
- **A Final Benefit Statement** of 2017 elections will be available in AccessPlus after **9:00 a.m. on December 16, 2016** for your review. **Please note: No corrections will be allowed.**

**If you do not want to make any changes.** It is highly recommended you still review the 2017 Participation Statement for changes to Iowa State University’s contribution for your benefits and also review the Benefit Confirmation Statement to verify 2017 elections.
# State of Iowa Plans - A Snapshot

<table>
<thead>
<tr>
<th>Plan Election</th>
<th>Your Choices</th>
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</table>
| **Medical**   | • Wellmark Classic Blue – Program 3 Plus  
• Wellmark Alliance Select – Iowa Select  
• Wellmark Blue Access |
| **Dental**    | • Delta Dental Plan – no open enrollment for 2017 |
| **Group Basic Term Life Insurance/Accidental Death and Dismemberment (AD&D)** | • 2 times annual salary in Basic Life Insurance,  
• Plus additional 4 times annual salary if accidental death  
• Portion of benefit for dismemberment  
• Reduces January 1 of the year you turn age 65  
• If enrolled for 10 consecutive years prior to retirement, eligible for to receive $4,000 term life, which is paid out upon death. |
| **Voluntary Term Life Insurance** | **Voluntary Term Life requires enrollment in group term basic life** (allowed to drop coverage any time throughout the year)  
• 1 times annual salary  
• 2 times annual salary  
• 3 times annual salary  
• 4 times annual salary  
• No participation  
• Annualized premium is a post-tax deduction  
• Premium may increase on January 1 of the year your age changes to a new tier  
• Portable plan upon resignation or retirement |
| **Long Term Disability (LTD)** | • ISU pay 100% of premium after one full year of service  
• 75% of first $1,000 of monthly salary, then 60% of additional monthly salary (up to $16,417) |
| **Flexible Spending Accounts (FSA)** | • Administrator is ASIFlex  
• Tax savings device  
• No employer contribution  
• **Health Care Spending Account** - employee may contribute $20.00 minimum/month up to **$2,600**/year. Expenses not incurred up to $500 may be carried forward to next plan year.  
• **Dependent Care Assistance Program** - up to $5,000 a year, per household (no carry over allowed) |
| **Additional Optional Benefit** | • Avesis Vision - Eyewear Plan |
| **Employee Assistance Program (EAP)** | • Employee & Family Resources (EFR)  
• 24/7 phone counseling at no cost  
• Up to 6 in-person sessions at no cost |
| **Vendor Value Added Services - see pages 39 – 40** | • Principal Financial Group – online legal documents, travel assistance, etc. (available if enrolled in ISU Group Term Basic Life Insurance)  
• PerksConnect - discount program for State employees  
• Wellmark - Blue 365 – discount program for Wellmark participants  
• Wellmark - Identity Protection; BeWell 24/7  
• Delta Dental of Iowa vision discount through EyeMed |

Available all the time to those participating in the plans listed.
The State of Iowa offers you three medical options. You can choose the plan that’s right for your individual situation.

If you make a change in your medical plan coverage, it will be effective with the new plan year, which is January 1, 2017 to December 31, 2017. The State of Iowa / Iowa State University:

♦ Single coverage and family coverage - the State pays the majority of the premium and you pay the remainder as listed below.

♦ Domestic Partner:
  • If you elect domestic partner coverage, manual enrollment is required.
  • The Federal tax code does not recognize a domestic partner for tax purposes. The benefit premiums for health may be treated as taxable and ISU will withhold taxes on its value; which may be a significant cost to the employee.

Medical Premiums

<table>
<thead>
<tr>
<th></th>
<th>DOUBLE SPOUSE</th>
<th>ISU SHARE (SINGLE)</th>
<th>YOU PAY (SINGLE)</th>
<th>ISU SHARE (FAMILY)</th>
<th>YOU PAY (FAMILY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program 3 Plus</td>
<td>N/A</td>
<td>$918.00</td>
<td>$20.00</td>
<td>$1,861.00</td>
<td>$335.00</td>
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<tr>
<td>Iowa Select</td>
<td>N/A</td>
<td>$915.00</td>
<td>$20.00</td>
<td>$1,861.00</td>
<td>$328.00</td>
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<td>Blue Access</td>
<td>N/A</td>
<td>$662.00</td>
<td>$20.00</td>
<td>$1,578.00</td>
<td>$20.00</td>
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<td>Program 3 Plus</td>
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<td>$1079.00</td>
<td>$20.00</td>
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<td>Spouse</td>
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<td>N/A</td>
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<td>Iowa Select</td>
<td>Contract Holder</td>
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<td>$1075.00</td>
<td>$20.00</td>
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<td>N/A</td>
<td>$1095.00</td>
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<tr>
<td>Blue Access</td>
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<td>N/A</td>
<td>$780.00</td>
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<td>Spouse</td>
<td>N/A</td>
<td>N/A</td>
<td>$800.00</td>
<td>$0</td>
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</table>

Double Spouse Option

When two Non-Supervisory Merit employees use the double spouse option, only the contract holder of the plan will have a premium of $20.00 deducted each month from their pay. The non-contract holder (spouse/partner) will not have the premium deduction.

If your State of Iowa spouse changes insurance plans, please communicate with the ISU Benefits Consultant.

Check with an ISU Benefits Consultant if your spouse is ISU Faculty, P & S or Supervisory/Confidential Merit.
This is only a summary of benefits and has been shortened from the Summary Benefit Comparisons. Benefits will be administered as described in each plan’s subscriber agreement or plan document. For further detail, refer to those documents or call Wellmark Blue Cross Blue Shield. If there are discrepancies between this summary and Wellmark’s benefit certificates, the certificates will govern in all cases.

Sections in **RED** reflect the new or changed provisions to the insurance plans.

<table>
<thead>
<tr>
<th>PLAN PROVISIONS</th>
<th>Blue Access</th>
<th>IOWA SELECT (Alliance Select)</th>
<th>PROGRAM 3 PLUS (Classic Blue)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GENERAL PLAN PROVISIONS</strong></td>
<td></td>
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</tr>
<tr>
<td>Benefits Available from Non-Participating Providers&lt;br&gt;&lt;i&gt;You are responsible for any amounts between the billed charge and the maximum allowable fee paid by Wellmark. These amounts will not accumulate towards the medical out-of-pocket limit.&lt;/i&gt;</td>
<td>None, unless prescribed and referred by a participating physician and approved by Wellmark, or in an emergency medical situation.</td>
<td>Normal plan benefits for network/non-network providers</td>
<td>Normal plan benefits</td>
</tr>
<tr>
<td><strong>Deductible</strong>&lt;br&gt;Single contracts are subject to the single deductible. Family amounts are reached from amounts accumulated on behalf of any covered family member or combination of covered family members. For family contracts, benefits are not available for any family members until the entire family deductible has been met.</td>
<td>None</td>
<td>$250 – single network / non-network&lt;br&gt;$500 – family network / non-network&lt;br&gt;&lt;br&gt;Applies to both inpatient and outpatient services.</td>
<td>$300 single&lt;br&gt;$400 family&lt;br&gt;Inpatient services only.</td>
</tr>
<tr>
<td><strong>Medical Out-of-Pocket Maximum</strong>&lt;br&gt;Family out-of-pocket is reached from amounts accumulated on behalf of any family member or combination of family members.</td>
<td>$750 Single&lt;br&gt;$1,500 Family</td>
<td>Single: $1,000&lt;br&gt;Family: $2,000&lt;br&gt;&lt;br&gt;All deductibles, coinsurance, and copayments go toward out-of-pocket limit. (Separate out-of-pocket maximum for prescription drugs.)</td>
<td>Single: $1,000&lt;br&gt;Family: $2,000&lt;br&gt;&lt;br&gt;All deductibles, coinsurance, and copayments go toward out-of-pocket limit. (Separate out-of-pocket maximum for prescription drugs.)</td>
</tr>
<tr>
<td>PLAN PROVISIONS</td>
<td>Blue Access</td>
<td>IOWA SELECT (Alliance Select)</td>
<td>PROGRAM 3 PLUS (Classic Blue)</td>
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<tr>
<td>Lifetime Benefit Maximum</td>
<td>None</td>
<td>None</td>
<td>None</td>
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<td>New Employee Preexisting Condition</td>
<td>No pre-existing conditions waiting period.</td>
<td>No pre-existing conditions waiting period.</td>
<td>No pre-existing conditions waiting period.</td>
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<tr>
<td>Waiting Period</td>
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<td>Preventative Services</td>
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<tr>
<td>Affordable Care Act (ACA)</td>
<td>Covered at 100% per ACA guidelines. Preventive care from participating providers with Wellmark is not subject to the deductible or coinsurance.</td>
<td>Covered at 100% per ACA guidelines. Preventive care from participating providers with Wellmark is not subject to the deductible or coinsurance.</td>
<td>Covered at 100% per ACA guidelines. Preventive care from participating providers with Wellmark is not subject to the deductible or coinsurance.</td>
</tr>
<tr>
<td>preventive services (This is new benefit for AFSCME-covered and UE/IUP-covered employees.)</td>
<td>Covered at 100% per ACA guidelines.</td>
<td>Covered at 100% per ACA guidelines.</td>
<td>Covered at 100% per ACA guidelines.</td>
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<td>PROFESSIONAL OFFICE SERVICES</td>
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<tr>
<td>Office Visit</td>
<td>$10 copayment</td>
<td>$15 copayment Once per date of service for exam only Other office services: Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>$15 copayment Once per date of service for exam only Other office services: 20%, no deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$15 copayment for exam only Network 10%, deductible waived Non-network 20%, after deductible</td>
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<td></td>
<td></td>
<td>Other office services: 20%, no deductible</td>
<td></td>
</tr>
<tr>
<td>Allergy Testing</td>
<td>$10 copayment</td>
<td>Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>20%, no deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20%, no deductible</td>
<td></td>
</tr>
<tr>
<td>Allergy Serum and Injections</td>
<td>$10 copayment</td>
<td>Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>20%, no deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20%, no deductible</td>
<td></td>
</tr>
<tr>
<td>Chiropractor</td>
<td>$10 copayment, if approved</td>
<td>$15 copayment for exam only Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>$15 copayment exam only Other office services: 20%, no deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$15 copayment exam only Other office services: 20%, no deductible</td>
<td></td>
</tr>
<tr>
<td>Routine Eye Exam</td>
<td>$10 copayment</td>
<td>$15 copayment exam only</td>
<td>Not covered</td>
</tr>
<tr>
<td>One routine vision exam per calendar year.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Routine Hearing Exam</td>
<td>$10 copayment</td>
<td>$15 copayment exam only</td>
<td>Not covered</td>
</tr>
<tr>
<td>One routine hearing exam per calendar year.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternity</td>
<td>$10 copayment for initial visit.</td>
<td>$15 copayment Once per date of service for exam only Other office services: Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>$15 copayment exam only Other office services: 20%, no deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$15 copayment for exam only Network 10%, deductible waived Non-network 20%, after deductible</td>
<td></td>
</tr>
<tr>
<td>Surgery, Radiology &amp; Pathology (office)</td>
<td>$10 copayment</td>
<td>Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>Surgery 0%, no deductible Radiology &amp; Pathology related to surgery 0%, no deductible Radiology &amp; Pathology non-surgery related 20%, no deductible</td>
</tr>
<tr>
<td>PLAN PROVISIONS</td>
<td>Blue Access</td>
<td>IOWA SELECT (Alliance Select)</td>
<td>PROGRAM 3 PLUS (Classic Blue)</td>
</tr>
<tr>
<td>----------------</td>
<td>-------------</td>
<td>-------------------------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td><strong>HOSPITAL SERVICES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Hospital Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preapproved Inpatient Admissions</td>
<td>Required</td>
<td>Required</td>
<td>Required</td>
</tr>
<tr>
<td>Inpatient Hospital Services</td>
<td>10%</td>
<td>Network 10%, after deductible Non-network 20%, after deductible</td>
<td>20%, after deductible</td>
</tr>
<tr>
<td>Room &amp; Board</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Physician Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Surgery</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Outpatient Hospital Services</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambulatory Surgical Center</td>
<td>10%</td>
<td>Network 10%, after deductible Non-network 20%, after deductible</td>
<td>20%, no deductible</td>
</tr>
<tr>
<td>Outpatient Diagnostic Lab, Radiology</td>
<td>10%</td>
<td>Network 10%, deductible waived Non-network 20%, after deductible</td>
<td>20%, no deductible</td>
</tr>
<tr>
<td>Infertility Services</td>
<td>Not covered</td>
<td>Artificial insemination, IVF, GIFT, ZIFT, and other transfer procedures, including cryopreservation of an embryo are covered up to a lifetime maximum of $25,000.</td>
<td>Artificial insemination, IVF, GIFT, ZIFT, and other transfer procedures, including cryopreservation of an embryo are covered up to a lifetime maximum of $25,000.</td>
</tr>
<tr>
<td><strong>EMERGENCY CARE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td>10%</td>
<td>Network 10% after deductible Non-network 20% after deductible</td>
<td>20%, no deductible</td>
</tr>
<tr>
<td>Urgent Care Center</td>
<td>10%</td>
<td>Network 10%, after deductible Non-network 20%, after deductible</td>
<td>20%, no deductible</td>
</tr>
<tr>
<td>Hospital Emergency Room</td>
<td>$50 copayment; waived if admitted</td>
<td>$50 copayment; waived if admitted 10% after copayment</td>
<td>$0, no deductible</td>
</tr>
<tr>
<td>BEHAVIORAL HEALTH SERVICES</td>
<td>Blue Access</td>
<td>IOWA SELECT (Alliance Select)</td>
<td>PROGRAM 3 PLUS (Classic Blue)</td>
</tr>
<tr>
<td>----------------------------</td>
<td>-------------</td>
<td>-------------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Inpatient mental health and chemical dependency treatment.</td>
<td>10% Network 10%, after deductible Non-network 20%, after deductible 20%, after deductible</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Visit</td>
<td>$10 copayment $15 copayment $15 copayment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient mental health and chemical dependency treatment</td>
<td>$0 $0 copayment $0 copayment</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OUTPATIENT THERAPY SERVICES</th>
<th>Blue Access</th>
<th>IOWA SELECT (Alliance Select)</th>
<th>PROGRAM 3 PLUS (Classic Blue)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chemotherapy Physical Therapy Occupational Therapy Respiratory Therapy Speech Therapy</td>
<td>$10 copayment per visit 60 visit limit for each of the following services: Physical Therapy (excluding Chiropractic) Occupational Therapy Respiratory Therapy Speech Therapy</td>
<td>Network 10%, after deductible Non-network 20%, after deductible 20%, no deductible</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PRESCRIPTION DRUG COVERAGE</th>
<th>Blue Access</th>
<th>IOWA SELECT (Alliance Select)</th>
<th>PROGRAM 3 PLUS (Classic Blue)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy Out-of-Pocket Maximum</td>
<td>Single $5,850 Family $11,700</td>
<td>Single $500 Family $1,000</td>
<td>Single $500 Family $1,000</td>
</tr>
<tr>
<td>Retail</td>
<td>30-day supply for maintenance and non-maintenance drugs. 90-day supply for maintenance drugs. 30-day supply for maintenance and non-maintenance drugs 90-day supply for maintenance drugs. 30-day supply for maintenance and non-maintenance drugs 90-day supply for maintenance drugs.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tier 1 Medications</td>
<td>$5.00 copayment - 30-day supply $15.00 copayment - 90-day supply $5.00 copayment - 30-day supply $15.00 copayment - 90-day supply $5.00 copayment - 30-day supply $15.00 copayment - 90-day supply</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tier 2 Medications</td>
<td>$15.00 copayment - 30-day supply $45.00 copayment - 90-day supply $15.00 copayment - 30-day supply $45.00 copayment - 90-day supply $15.00 copayment - 30-day supply $45.00 copayment - 90-day supply</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tier 3 Medications</td>
<td>$30.00 copayment or 25%, whichever is greater, - 30-day supply $90.00 copayment or 25%, whichever is greater, - 90-day supply $30.00 copayment for a 30-day supply $90.00 copayment for a 90-day supply $30.00 copayment for a 30-day supply $90.00 copayment for a 90-day supply</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tier 4 Medications</td>
<td>Same as Tier 3 Same as Tier 3 Same as Tier 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mail Order</td>
<td>Blue Access</td>
<td>IOWA SELECT (Alliance Select)</td>
<td>PROGRAM 3 PLUS (Classic Blue)</td>
</tr>
<tr>
<td>--------------------</td>
<td>-----------------------------------------</td>
<td>------------------------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>Quantity</td>
<td>90-day supply for maintenance drugs only</td>
<td>90-day supply for maintenance drugs only</td>
<td>90-day supply for maintenance drugs only</td>
</tr>
<tr>
<td>Tier 1 Medications</td>
<td>$10.00 copayment</td>
<td>$10.00 copayment</td>
<td>$10.00 copayment</td>
</tr>
<tr>
<td>Tier 2 Medications</td>
<td>$30.00 copayment</td>
<td>$30.00 copayment</td>
<td>$30.00 copayment</td>
</tr>
<tr>
<td>Tier 3 Medications</td>
<td>$60.00 copayment</td>
<td>$60.00 copayment</td>
<td>$60.00 copayment</td>
</tr>
<tr>
<td>Tier 4 Medications</td>
<td>$60.00 copayment</td>
<td>$60.00 copayment</td>
<td>$60.00 copayment</td>
</tr>
</tbody>
</table>

**Prescription Drug Coverage – General Information**

| Prescription Oral Contraceptives and Contraceptive Devices | Covered | Covered | Covered |
| Prescription Drugs/Items for Smoking Cessation            | Not Covered | Not Covered | Not Covered |

In most cases, when you purchase a brand name drug that has an FDA-approved “A”-rated generic equivalent, Wellmark will pay only what it would have paid for the equivalent generic drug. You will be responsible for your payment obligation for the equivalent generic drug and any remaining cost difference up to the maximum allowed fee for the brand name drug.

**Important Information:**
This document provides a general summary of the basic benefit provisions and is not a substitute for the Wellmark Certificate. If there are any inconsistencies between this summary and the benefit Booklet, will prevail. Please refer to the Wellmark Certificate for exact benefits, exclusions, and limitations or contact Wellmark’s customer service at 1-800-622-0043.
There is no open enrollment for benefit year 2017!

**Monthly Premium for 2017**

These rates are for active employees only.

- Iowa State University pays the full premium for single coverage.

- For the family coverage, employee share will pay $38.53 per month.

- The double spouse participant amounts will be determined by coverage eligibility. **When two Non-Supervisory Merit employees use the double spouse option, they will each have $9.85 deducted monthly from their pay.**

- If currently enrolled in a double spouse contract without children, it may be more cost effective to enroll in two single plans.

**Plan Provisions**

The dental plan benefits are divided into four categories - Diagnostic and Preventive Services, Routine and Restorative Services, Major Restorative Services and Orthodontic Treatment.

The maximum benefit for each procedure will be the actual cost charged to the extent that the charge does not exceed Usual, Customary and Reasonable (UCR).

**There is a maximum benefit of $1,500.00, per person / per year. Excluding orthodontia, which has a separate lifetime maximum of $1,500.00.**

**Once maximum is used in a benefit year any additional services will be patient liability.**

Limitations may apply for any service, see certificate of coverage or contact Delta Dental Customer Service before approving service.
**Dental Plan Details**

**Diagnostic and Preventive Services - Payable at 100% of UCR**
- Dental cleanings allowed twice in a benefit period
- Oral evaluation allowed twice in a benefit period
- Topical fluoride applications, only for unmarried dependent children under age 19 - once every 12 months
- X-rays
- Limitations may apply for any service, see certificate of coverage before approving service

**Routine and Restorative Services - Payable at 80% of UCR**
- Emergency treatment for relief of pain
- Fillings
- Extractions
- Anesthesia
- Other basic repair work
- Space maintainers for children under age 14
- Topical application of sealants for children under age 15

**Major Restorative Services - Payable at 50% of UCR**
- Endodontics
- Non-surgical Periodontal
- Cast Restorations
- Crowns
- Surgical Periodontal
- Bridges
- Dentures

**Orthodontic Treatment – Payable at 50% of UCR**
- Available only to dependent children up to age 19
- No deductible
- Lifetime maximum of $1,500.00 per person

**Exclusions:**
- Treatments for cosmetic purposes that are unnecessary for dental health
- There may be limitations to procedures listed, refer to certificate located on the Benefits web page
**Things to Consider**

- The State offers **infrequent** open change periods.

- The dependents can only be added during your initial enrollment or as a result of a qualifying event such as marriage, birth, adoption or through the loss of dental coverage (refer to the list of events on page 20). Only those dependents directly affected by the event may be added.

- Eligible dependents include your spouse or partner and unmarried or married dependent children under age 26

- Unmarried dependent children who are full-time students over age 26.

- Domestic Partners: employee share may be subject to imputed income.

**NOTICE:** Employees should keep in mind that there may be tax consequences involved with continuing health or dental coverage for full time students over age 26. Employees should consult with a tax advisor with related tax questions.

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**From the Member tab on the Delta Dental website**

http://www.deltadentalia.com

- Elect to have explanation of benefits delivered electronically instead of through the mail.
- Access to vision discount, see page 34 for more information
The Health Insurance Portability and Accountability Act of 1996 (HIPAA) allows employees to enroll themselves and their spouse/partner in an employer-sponsored medical plan without underwriting (approved Statement of Health).

The benefit elections you make stay in effect from year to year unless you elect to make a change during the open change period or with a qualifying event. Payroll deductions, which cover these benefits are taken from your paychecks January through December.

The IRS allows changes during the year for qualifying family status changes only, which include:

**Qualifying Events for adding or dropping dependents outside of the open change period**

- Marriage
- Divorce, annulment, legal separation
- Your change of employment status
- Birth of a biological child, adoption of a child, placement for adoption, or addition of a step or foster child
- Dependent becomes eligible again due to an event
- Employee or spouse reaches age 65
- Employee or dependent becomes eligible for Medicare
- You, your spouse or your dependent become entitled to Medicare or Medicaid
- Dependents become ineligible for Medicaid, CHIPRA or hawk-i
- Spouse or dependent commences employment
- Spouse’s Retirement
- Spouse terminates employment or change in employment
- Served with a judgment or order or decree
- Death of a spouse or dependent
- Change in residence for yourself, spouse or dependent
- Dependent no longer eligible (age 26 or over), student status (no longer a full-time student) or marital status (married). Exception given to adding adult children because of dependent law, see below.

Contact University Human Resources Service Center at 515-294-4800 or 877-477-7485 and ask for a Benefits Consultant to discuss the event qualifications/changes allowed and to obtain appropriate forms.

If you have a change in family status, which affects eligibility, you must make your change within 30 days of the event, except you have 60 days to add a newborn or newly adopted child or a dependent previously covered by Medicaid, Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) or Healthy and Well Kids in Iowa (hawk-i) **Please note, dependents of State of Iowa employees are not eligible for hawk-i.**
Double Spouse Option / Not Double Covered

If you and your spouse/partner both work for ISU, it’s important that you understand the following as it relates to your benefits:

**Double Coverage:**

- An employee cannot be enrolled in two contracts as both an employee and a dependent of another employee.

- Child(ren) cannot be covered as dependents by both parents. One spouse must be designated as the “contract holder”. The other spouse will be designated as the spouse and is a dependent with the children on the contract holder’s policy.

**Double Spouse:**

- If both you and your spouse are Non-Supervisory Merit you will each pay the double spouse share as shown on page 11 for medical and page 17 for dental.

- Initial enrollment in the double-spouse option requires completion of a double spouse form, including the name and University ID of the other spouse. Please contact the Benefits Office if you are electing this coverage for the first time.

If your spouse/partner is employed at a non-Regents State agency, i.e. the Department of Transportation, you may elect the double spouse option through your spouse’s employer and their insurance options. The agency should provide copies of the double spouse forms and you must manually sign up (not allowed on AccessPlus) in the Benefits Office to participate in this option. Contact Benefits Consultant for details.

If your spouse is Faculty, Professional & Scientific or Supervisory/Confidential Merit, review options with assistance from a Benefits Consultant.
Term Life Insurance Options

Iowa State University offers you the opportunity to elect additional term life insurance coverage for yourself. These options give you greater flexibility to designate a benefit program to meet your needs. Principal Financial Group is the underwriter for the group term basic and voluntary term life insurance.

Are you currently not enrolled in life insurance?

- This would be your opportunity to apply for group term basic and/or voluntary term life insurance.
- Forms to apply for coverage located on Benefits web page, “Non-Supervisory Merit (Organized)” Classification and then click on “Open Change Period Information” section and then “Forms” to locate:
  - 2017 Non-Supervisory Open Change Period Enrollment
  - Principal Financial Group Beneficiary Designation/Change
  - Return forms to Benefits Office for processing
- Before approval of coverage, you are required to provide evidence of insurability by completing the online Principal Statement of Health Questionnaire. An e-mail will arrive at your ISU e-mail address from principalcustomerservice@ibuinc.com.
- Effective date for group term basic or voluntary term life would be upon approval.
- If you would like to visit with a Benefits Consultant to discuss options or to obtain forms, contact University Human Resources Service Center, 3810 Beardshear Hall, or by calling 515-294-4800 or 877-477-7485.

<table>
<thead>
<tr>
<th>Group Term Basic Life Insurance/Accidental Death and Dismemberment (AD&amp;D)</th>
<th>Value of Group Term Basic Life insurance coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage while actively employed.</td>
<td>• Natural death - 2 times budgeted salary</td>
</tr>
<tr>
<td>This is a term policy</td>
<td>• Accidental death - additional 4 times budgeted salary in accidental death.</td>
</tr>
<tr>
<td>If requirements are met, policy will become a $4,000 paid-up term life policy at retirement.</td>
<td>• Portion of benefit for dismemberment.</td>
</tr>
<tr>
<td>Cost shared by employee and ISU</td>
<td>NOTE: Group Term Basic Life and AD &amp; D are reduced by 35% on January 1 of the year you attain the age 65.</td>
</tr>
<tr>
<td>For example someone making $19,700 would pay $2.00. Someone making $26,600 would pay $2.70.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Voluntary Term Life/AD&amp;D Insurance</th>
<th>Four options:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group Term Basic Life Insurance/AD &amp; D required for participation</td>
<td>✔ 1 times budgeted salary &amp; AD &amp; D</td>
</tr>
<tr>
<td>Premiums are paid entirely by employee as a post-tax deduction.</td>
<td>✔ 2 times budgeted salary &amp; AD &amp; D</td>
</tr>
<tr>
<td>There are additional benefits included with AD &amp; D.</td>
<td>✔ 3 times budgeted salary &amp; AD &amp; D</td>
</tr>
<tr>
<td>Refer to certificate located on Benefits web page: <a href="http://www.hrs.iastate.edu/hrs/benefits">http://www.hrs.iastate.edu/hrs/benefits</a>, under subject line - Non-Supervisory Merit (Non-Organized); then Life Insurance; then click on: Group Term Basic Life Insurance or Voluntary Term Life Insurance to find the summary plan document for complete details.</td>
<td>✔ 4 times budgeted salary &amp; AD &amp; D</td>
</tr>
<tr>
<td>Upon termination or retirement, plan offers portable coverage option.</td>
<td>Minimum: Greater of 1 times of budgeted salary or $10,000.</td>
</tr>
<tr>
<td>Coverage will terminate at age 75.</td>
<td>Maximum: Lesser of 4 times of budgeted salary or $500,000.</td>
</tr>
<tr>
<td>No age reduction on Voluntary Term Life Insurance.</td>
<td>You are allowed to drop this coverage any time throughout the year by submitting a written request to the Benefits Office.</td>
</tr>
</tbody>
</table>

If you wish to reduce or drop coverage, you may go into AccessPlus or contact University Human Resources Service Center, Benefits Office to obtain the appropriate form.
### 2017 Premiums
Voluntary Term Life & AD&D
Costs per $1,000

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 29</td>
<td>$ 0.07</td>
</tr>
<tr>
<td>30-34</td>
<td>$ 0.08</td>
</tr>
<tr>
<td>35-39</td>
<td>$ 0.10</td>
</tr>
<tr>
<td>40-44</td>
<td>$ 0.13</td>
</tr>
<tr>
<td>45-49</td>
<td>$ 0.20</td>
</tr>
<tr>
<td>50-54</td>
<td>$ 0.30</td>
</tr>
<tr>
<td>55-59</td>
<td>$ 0.46</td>
</tr>
<tr>
<td>60-64</td>
<td>$ 0.70</td>
</tr>
<tr>
<td>65-69</td>
<td>$ 1.19</td>
</tr>
<tr>
<td>70 &amp; over</td>
<td>$ 3.12</td>
</tr>
</tbody>
</table>

### Additional Information:

**Group Term Basic Life Premiums** - insurance rates are **not** changing for 2017. The cost for employees will continue at 5 cents per one thousand dollars of coverage.

**Voluntary Term Life Premiums:**

- Premiums are paid with post-tax dollars.
- The premium will change on January 1 of the year your age will change you into a new age group.
- These premiums are subject to change, you should review them during each open change period.

To calculate premium:

1. Round your annual budgeted salary to the nearest $1,000
2. Multiply by the level of coverage you are applying (1, 2, 3 or 4 times your salary)
3. Divide by $1,000 and multiply by the cost for your age group

**Beneficiary Designation/Change:** Updating life insurance beneficiaries are allowed year round. If newly electing group term basic or voluntary term life insurance, beneficiary designation/change form must be completed. The form is available online on Benefit web page at: [http://www.hrs.iastate.edu/hrb/benefits](http://www.hrs.iastate.edu/hrb/benefits). The completed form should be sent or dropped off at the ISU Benefits Office (3810 Beardshear).
**HEALTH CARE FLEXIBLE SPENDING AND DEPENDENT CARE ASSISTANCE PROGRAM**

*ASIFlex* is the administrator of the Flexible Spending programs.

Be aware: If you, or a family member, have a Health Savings Account (HSA) plan independently or from an employer, check with the HSA Plan Administrator about the use of a health care flexible spending account (FSA).

**What is a Flexible Spending Account?**

A tax savings device. You contribute a portion of your pay into an FSA or DCAP on a pre-tax basis. Most people can save at least 25% or up to 40% on each dollar that is set aside in these programs when claimed with eligible expenses.

There are two types of accounts:

- **Health Care FSA:**
  - Essential health care expenses that are not covered, or are partially covered, by your medical, dental and vision insurance plans
  - Out-of-pocket health care expenses, including prescription drug costs, medical, dental, vision and hearing expenses and some approved over-the-counter items

- **Dependent Care Assistance Program (DCAP):**
  - Your child or dependent care expenses, including day care, babysitting, in-home care for older dependents and before & after school care expenses

When you enroll in the FSA or DCAP, you decide how much to contribute to the account for the entire plan year. The money is deducted from your pay pre-tax (before Federal & State income taxes and FICA taxes are deducted) in equal amounts over the course of the plan year. After you incur expenses that qualify for reimbursement, you submit claims (reimbursement requests) to *ASIFlex* to request tax-free withdrawals from your FSA to reimburse yourself for these expenses.

Using the FSA to pay for expenses will reduce your out-of-pocket costs significantly. Your personal tax rate may vary, and your savings will vary according to your net tax rate. Use the Tax Savings Calculator found at [http://isu.asiflex.com](http://isu.asiflex.com) to estimate your savings.

**Enrollment Information:**

| The health care flexible spending account has an annual maximum of $2,600. |
| The dependent care assistance program has a maximum of $5,000 per household. |
Annual re-enrollment is not required. If you are currently enrolled in either flexible spending account, your 2016 contribution will automatically become the 2017 election. You are required to take action only if you want to start, stop, increase or decrease the current election.

Eligible expenses are expenses incurred during the calendar year (January 1 through December 31 or prior to your termination of employment). The determining factor is the actual date of services, not the date of billing or the date the bill is paid.

If you terminate your employment with Iowa State University, your contributions into your Flexible Spending Account plan will terminate at the end of the month in which your employment ends. If you have contributed funds remaining after your termination date, you can claim:

- Dependent care expenses for the remainder of the calendar year until your contributions are all claimed.
- Health care expenses you have two options:
  1. Claim expenses that were incurred while you were actively employed. If you select this plan you have until April 30th following the close of the current plan year to submit claims.
  2. Elect COBRA coverage, and pay the monthly contribution amount on a post-tax basis.
     This option allows you to extend your period of coverage for the remainder of the plan year.

Enrolling in a Health Care FSA?

The Health Care FSA is an account that allows you to set aside pre-tax dollars to pay for out-of-pocket medical expenses for you, your spouse and any tax dependents. Your full annual election is available to you on your first day of coverage, which means that when you incur eligible expenses, you can submit reimbursement requests immediately.

The key to getting the most out of your Health Care FSA is to maximize your contributions based on the expenses you, or any of your tax dependents, anticipate incurring during the plan year.

Eligible Expenses:

For detailed information regarding health care flexible spending account go to the ASIFlex website: http://isu.asiflex.com/default.html:

- Medical Expense Estimator
- Review Frequently Asked Questions
- Eligible Expense List Includes
  - Medical Expenses
  - Potentially Eligible Expenses
  - Many over-the-counter (OTC) medicines (see the OTC guide)
  - Not Eligible Expenses

Health Care Flexible Spending Account

- If you decide to enroll, estimate anticipated out-of-pocket medical, dental and/or vision expenses for the year.
- If you do not incur expenses for the full amount during the plan year (January 1 through December 31), federal regulations mandate that remaining funds beyond the $500 carry over amount, may not be refunded to the employee. Iowa State University uses forfeited funds to help defray the administrative costs of the plan.
You may call 515-294-4800 / 877-477-7485 or email us at: benefits@iastate.edu to discuss your options

Sign up for the Flexible Spending Account today and pay lower taxes!! Use this tax-free money to pay for expenses you are already incurring for you, your spouse and/or any tax dependents!

**Save more money…**

**Enrolling in a Dependent Care Assistance Program?**

The Dependent Care Assistance Program allows you to use pre-tax dollars to pay for out-of-pocket childcare and/or elder dependent care expenses. You can set aside up to $5,000 ($2,500 if married and filing separately on your federal income taxes) per year in the account. Please note that the $5,000 is a household maximum. The funds are deducted before federal and state income taxes and FICA are assessed, and reimbursements are completely tax free.

Eligible expenses include day care, babysitting, general purpose day camps and pre-k expenses. Please note that you will be required to include your provider’s tax identification number or Social Security Number with your reimbursement request.

**Ineligible** expenses include:

- Overnight camps
- Care provided by your tax dependent, your spouse or your child who is under the age of 19
- Care provided while you are not at work

**When Can I Start Requesting Reimbursement?**

Eligible expenses can only be incurred on, or after, the first day of your plan year, January 1, 2017.

You are allowed to submit January 2017 claim reimbursement requests as soon as services are provided. **However, funds are not released until after February 1, 2017,** following the initial month contribution on January 31, 2017.

For the Health Care FSA, your full annual election amount is available upon your initial contribution to the spending account.

For the Dependent Care Assistance Program, you are allowed to be reimbursed only up to what you have had contributed from your pay at that point, but requests in excess of this amount will be reimbursed as additional contributions are taken from your pay.

You may submit reimbursement requests for either account as frequently or infrequently as you prefer. If all your insurance is through Iowa State University, automatic claim filing may be an option. You can find this form online at [http://isu.asiflex.com](http://isu.asiflex.com).

Reimbursement request for eligible claims incurred during the 2016 calendar year must be submitted and received by ASIFlex on or prior to April 30, 2017. **After that date unused, prior year contributions are forfeited.**
How Do I Submit Claims and Receive Reimbursement?

Claim Submission:

- **Toll-free fax - 877-879-9038**
  
  This option provides easy and fast claims submission. You may submit your claim via ASIFlex’s toll-free fax number 24 hours a day, 7 days a week.

- **US Mail**
  
  P.O. Box 6044, Columbia, MO 65205

- Additional claim forms may be obtained by visiting http://isu.asiflex.com.

- **Online – https://my.asiflex.com**
  
  Submitting your claim online is easy and convenient! In order to submit your claim via ASIFlex’s secure online portal, you will need to create a user name and password. Once you are inside the portal, you are allowed to use your University ID to access your account.

Reimbursement:

- **Automatic Reimbursement!** Available when enrolled in the ISU medical and dental plans. If you choose to sign up to have claims rollover from your ISU medical, prescription and dental provider to ASIFlex, you will not be required to submit reimbursement requests for eligible deductible, co-insurance and co-pay expenses that are processed through the insurance carrier. These eligible expenses will be automatically transmitted to ASIFlex, who will then initiate reimbursement to you automatically for these expenses. To sign up for this service (or to cancel it) please complete the Claims Rollover Authorization Form.

- **Go Paperless!** Sign up to receive notifications from ASIFlex via e-mail, rather than US Mail. By signing up for e-mail notification, you will receive reimbursement notifications, account summary statements and more within one day of processing. Online Account Detail and the Secure Message Center are available 24 hours, 7 days a week at https://my.asiflex.com. Complete history, including available funds, year-to-date contributions, year-to-date reimbursements and more are available at online account detail.

- **Self-service mobile app!** It is free to download and use. Just go to the Google Play Store for Android devices or App Store for Apple devices and search for ASIFlex. Or you can scan the appropriate code from the ASIFlex website: http://isu.asiflex.com. Use your phone/tablet to review your account and file claims. No need to scan or copy your receipt – simply use the app to take a picture with your device’s camera.

- Sign up for **direct deposit today!** By electing to receive reimbursements via direct deposit, you will receive your money up to 5 days faster than waiting for a check to be mailed to your home address. Direct deposit enrollment forms can be found at http://isu.asiflex.com, or by calling customer service.
REMINDER FOR 2016

PARTICIPANTS:

USE OR LOSE IT!!

REIMBURSEMENT FOR 2016 claims, you will have until April 30, 2017 to submit a reimbursement request for incurred eligible expenses for 2016.

Medical flexible spending account only: after April 30, 2017, the amount above $500 of unused 2016 contributions is forfeited. The carry over amount of $500 or under will be available to claim with 2017 expenses.

What If I Have Questions?

Contact ASIFlex Customer Service by:

Phone: 800-659-3035 TTY Phone: 866-908-6043
Monday through Friday – 7:00 a.m. – 7:00 p.m. Central Time
Saturday – 9:00 a.m. – 1:00 p.m. Central Time

E-mail: asi@asiflex.com

Web: http://isu.asiflex.com
The Premium Conversion Plan (Pre-tax) allows you to pay your share of:

- Medical insurance
- Dental insurance
- Life insurance
- Parking

While saving money on Federal/State income taxes and Social Security (FICA and Medicare) taxes. This means that your premiums are deducted from your gross wages before taxes are calculated.

For example: if your monthly premium for medical, dental, and life insurance is $150 and your Federal tax rate is 28%, you would be saving $42 a month, or $504 a year in Federal taxes.

**Employees will be automatically enrolled in the premium conversion plan. You may decline to participate during this open change period, if you do not have a flexible spending account for 2017.**

If you want to change, you must complete a Pre-tax Premium Conversion Form and submit it to the Benefits Office. Changes can only be made during the open change period or at the time of a qualifying change in family or employment status.

- ✓ Note that participating in this program excludes you from the ability to claim your insurance premiums as medical expenses on your annual income tax forms.

- ✓ You will also need to be aware enrollment in the Premium Conversion Plan reduces the Social Security Tax that is withheld, so your Social Security benefits at retirement may be slightly reduced. Enrollment in this plan will not affect contributions to your basic retirement plan.
Iowa State University offers all benefits eligible, actively-at-work employees and eligible family members a voluntary group eyewear discount plan.

- The eyewear plan vendor is called Avesis Vision.
- The Avesis plan does not cover eye exams.
- Exams may be covered under your medical plan.
- The Avesis plan will allow access to one of the most competitive vision networks in the nation. Avesis contracts with independent optometrists, ophthalmologists and most retail chain centers making it convenient for employees to purchase glasses or contacts at locations close to where they live or work.

The same eligibility rules apply to dependents as the medical and dental plans (see pages 5 - 6).

**ENROLL / CHANGE / END**

During the open change period, changes for the 2017 plan year may be made on-line from October 17, 2016 through November 18, 2016. Follow the instructions on pages 7 – 9 of this guide.

All changes to enrollment in plan will be effective February 1, 2017.

To obtain a form:

- Contact University Human Resources Service Center at 515-294-4800 / 877-477-7485 or via e-mail at hrshelp@iastate.edu.
- The form is also available from the Benefits web page at: [http://www.hrs.iastate.edu/hrs/benefits](http://www.hrs.iastate.edu/hrs/benefits)
  1. Under: “Non-Supervisory Merit-Organized”
  2. Then click “Open Change Period Information”
  3. Then click on “Forms” to find the “Avesis Vision Voluntary Eyewear Plan Form”
  4. **Once completed, return to the University Human Resources Service Center at 3810 Beardshear Hall by 5:00 p.m. on November 18, 2016.**
NEW 2017 PREMIUMS

Monthly premium deducted on a post-tax basis

<table>
<thead>
<tr>
<th>Plan Description</th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>$7.33</td>
</tr>
<tr>
<td>Employee + Spouse</td>
<td>$13.82</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$15.13</td>
</tr>
<tr>
<td>Family</td>
<td>$19.46</td>
</tr>
</tbody>
</table>

A complete listing of providers in Iowa and the United States can be found:

- [www.avesis.com](http://www.avesis.com)
- Call 800-828-9341 to contact Avesis Customer Service Representatives
- To identify our plan
  - Use group #60790-1227
  - Plan #9133

Want more information?

Detail information regarding the Avesis plan design can be found on the Benefits web page at:
[http://www.hrs.iastate.edu/hrs/benefits](http://www.hrs.iastate.edu/hrs/benefits)

1. Under: “Non-Supervisory Merit-Organized”
2. Then click “Open Change Period Information”
3. Go to “Avesis Eyewear Discount Plan” Section
4. Click on “2017 Plan Design”
The Employee Assistance Program (EAP) is administered by Employee & Family Resources (EFR). ISU provides an EAP at no cost to you or your eligible family members. If you are referred for additional assistance beyond what is provided by your EAP, contact your insurance company, otherwise the financial responsibility will be yours.

What kind of help and resources does my EAP provide?

You and any eligible family members can call EAP counselors for any life issue that causes you concern or when you are ready to grow personally and professionally. Some common issues that EAP counselors are ready to help you with include:

- Work stress
- Family and personal relationships
- Emotional or mental health
- Work and life balance
- Substance abuse
- Financial or legal concerns
- Personal growth and development

Services through EAP should be used when you are facing a personal problem. The EAP counselors will provide you timely and free access to short-term, confidential, and professional services.

Number of visits allowed at no cost:

- Up to six sessions per year
  - Per separate issue

- Telephone counseling 24/7
  - Unlimited number of calls

How can I find out more about all the services available?

- Webinars
- On campus workshops – AccessPlus/HR Training
- Newsletters

By phone call: Des Moines, IA - 515-244-6090 / Nationwide - 800-327-4692 / TTY – 877-542-6488
By web: www.efr.org/wps/eap.
**Genworth Financial**

There is not an open change period for long-term care insurance.

As a voluntary plan, eligible employees, retirees and their qualifying family members are invited to apply for group long term care insurance with Genworth Life Insurance Company any time throughout the year.

Underwriting will be required for any eligible person applying for coverage. A new employee that is beyond the assigned “new hire” deadline will be required to have underwriting.

Questions about long-term care insurance:

- Call Genworth at 800-416-3624
- To view plan details, including videos
  - [Genworth Financial online](#) (the group ID is ISU; and the access code is groupltc)

**John Hancock Long Term Care Insurance**

Existing contracts with John Hancock remain in place under the terms of the existing John Hancock policy and at premium rates determined by John Hancock. This plan is not open to new applicants.

For questions regarding your John Hancock contract:

- Call John Hancock at 888-999-4563
- Via e-mail: [http://iowasu.jhancock.com](http://iowasu.jhancock.com)
There may be other additional discounts in the community that are not included in the following information.

Below is a listing of some services from our current vendors:

**Additional Services with Dental Enrollment**

From the subscriber line on the Delta Dental website: [http://www.deltadentalia.com/subscriber](http://www.deltadentalia.com/subscriber)

- Elect to have explanation of benefits delivered electronically instead of through the mail.
- All Delta Dental subscribers have access to a vision discount program through EyeMed Vision Care.
  - For more information on vision discount services go to above link and click on “Vision Discount”

**Additional Services with Medical Enrollment at Wellmark**

- Elect to have explanation of benefits delivered electronically instead of through the mail. Sign up for this great benefit through Wellmark at: [www.wellmark.com](http://www.wellmark.com)
- Wellmark BC/BS Blue 365 Member Discounts and Services:
  - As a member of the Blues, you have access to discounts and services through Blue365, a program designed by the Blue Cross Blue Shield Association.
    - Diet
    - Family Care
    - Financial
    - Fitness
    - Hearing
    - Travel
    - Vision

  Available discounts and contact information are found on the Wellmark website: [http://www.wellmark.com/Member/UsingBenefits/Blue365.aspx](http://www.wellmark.com/Member/UsingBenefits/Blue365.aspx)

- Identity Protection Services: credit monitoring, cyber monitoring, fraud detection, reimbursement insurance
  - Enroll through myWellmark online account or call 866-486-4812; Enrollment code: 4170999624
- BeWell 24/7: assistance locating health care providers and facilities at home or while traveling; estimate your costs for common medical procedures/services; coordinate health care appointments
  - Call Wellmark at 844-842-3935
Additional Discount Program for State Employees

Perks

Get discounts at over 300,000 local merchants, 350 national retailers and 200 gift card brands, PLUS thousands of daily deals and cash back online savings mall.

Introducing a Unique Savings Network Just For You

To register for Perks:
2. Click “Register Now” in the upper middle area of the site.
4. Complete the Profile information

Additional Services through Principal Financial Group

Available when enrolled in ISU Group Term Basic Life

Travel Assistance

As an employee covered by a group term life insurance policy from Principal Life Insurance Company, you are eligible for travel assistance services provided by AXA Assistance.

You, your spouse and dependent children (whether traveling together or separately) have access to travel, medical, legal and financial assistance plus emergency medical evacuation benefits when traveling domestically or internationally 100 or more miles away from home for up to 120 consecutive day.

These services are available 24 hours a day, 365 days a year.

For more information call:
✓ Within the U.S. 888-647-2611
✓ Outside the U.S. call collect 630-766-7696

Legal Documents & Identity Theft Kit

This is a big expense saver for families and a great value-added benefit!

As an option, if you are a covered employee under the group term life policy provided by Iowa State University, Will, Living Will, Healthcare Power of Attorney, Financial Power of Attorney preparation services are available through ARAG/Principal Financial Group. At any time you may begin using these free documents by visiting: www.ARGwills.com/Principal.
ARAG provides you with the information on how to protect and restore your identify if it is stolen.

To begin this service from the ARAG web site, click on “Register Here” on the right-hand column of the screen. The system will require you to enter the **Iowa State University group policy number N1460 with Principal Financial Group.**

If you have questions or would like to learn more about this service contact Customer Care at 800-546-3718 or [www.ARAGwills.com/Principal](http://www.ARAGwills.com/Principal).

**Available when enrolled in ISU Group Term Life and/or Long-Term Disability**

- **Hearing Aid Program** – Free annual screenings through American Hearing Benefits, Inc. Eligible for up to 60% off digital hearing aids with two-year warranty at no additional charge. For information go to: [www.americanhearingbenefits.com](http://www.americanhearingbenefits.com) or 866-925-128.

- **Oral Health Care** – Discounts available on Epic brand (contains Xylitol) toothpaste, oral rinse, mints and gum. 50% off the first order and 25% off reorders. For information go to: [www.epicdental.com](http://www.epicdental.com).

- **Magazine Program** – One year subscription to Diabetic Living for $6. Savings of 70% off regular retail price. For information to go: [www.principal.com/iabeticliving](http://www.principal.com/iabeticliving).
Voluntary Group Supplemental Retirement Plan

Starting or increasing a supplemental plan can help your retirement nest egg grow!

At retirement it is estimated an individual will need income to last 30 years or more. While employer sponsored retirement plan and Social Security benefits may help cover essential living expenses, this may not be enough to finance the lifestyle you have in mind. This is why people should consider taking advantage of the supplemental retirement plan.

ISU offers two ways to save additional money for retirement. The right choice depends on current and anticipated tax situation in retirement:

- Pre-tax deductions
  - Contribution comes out of your paycheck before your income is taxed, which lowers your taxable income
- After-tax deductions (Roth 403b)
  - Contribution comes out of your paycheck after your income is taxed, which does not lower your current taxable income. Distributions taken during retirement are tax free.

Amount Allowed to Defer?

Per 2017 IRS Guidelines

- Under age 50 - $18,000 per year in a voluntary (elective salary deferral)
- Special 15-yr service catch-up option, if eligible - $3,000
- Age 50 or older - in calendar year - $6,000 a catch-up contribution
- Additional – Worked for an eligible employer for 15 or more years, may be eligible to make additional elective salary deferral contributions of up to $3,000 per year
- KEEP IN MIND – changes to amounts of contributions may be changed later if desired

Approved Vendor List:

- TIAA
- VALIC
- Met Life
- Ameriprise Financial

How to Start:

- Provide proof of application with vendor before your payroll deduction will be set up. (for TIAA, participants may enroll on-line)
- Complete Elective Payroll Reduction Agreement Form – found on Benefits web page under section “Forms”
- Deadline to submit requests to Benefits Office each month is the 15th for changes to the end of the month payroll
The following is a list of web sites and telephone numbers associated with your benefits:

<table>
<thead>
<tr>
<th>Department</th>
<th>Telephone Numbers</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>University Human Resources Service Center</td>
<td>515-294-4800 / 877-477-7485</td>
<td>To access the Benefits page, go to the ISU homepage at <a href="http://www.iastate.edu">www.iastate.edu</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• On the index line, click on the letter “B” then look for Benefits Employee and click</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Which will bring you to the Benefits homepage: <a href="http://www.hrs.iastate.edu/hrs/benefits">http://www.hrs.iastate.edu/hrs/benefits</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• On this page, click to the “Non-Supervisory Merit” line for each benefit category.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Human Resources Customer Service – <a href="mailto:CustServe.HRE@iowa.gov">CustServe.HRE@iowa.gov</a></td>
</tr>
</tbody>
</table>

### MEDICAL PLANS

Register on-line as member for access to claims information.

Web/phone to find/call for participating Physician Information.

Wellmark BC/BS of Iowa – Iowa or National site for Nationwide search for providers.
- Click on “Find a Doctor or Hospital” link
- Click on “Doctors (Iowa, South Dakota & bordering counties)”
- For information on care outside of Iowa, click on “National Providers”
- For information on care outside of the U.S., click on “International Providers”

#### Classic Blue Plan
- Program 3 Plus
- 800-622-0043
- [www.wellmark.com](http://www.wellmark.com)

#### Alliance Select (PPO)
- Iowa Select
- 800-622-0043
- [www.wellmark.com](http://www.wellmark.com)

Wellmark Health Plan of Iowa (WHIP) - Iowa site for local, in-state providers

#### Blue Access
- 800-553-7801
- [www.wellmark.com](http://www.wellmark.com)

### DENTAL PLAN

Register as a subscriber to access your dental insurance information and request electronic explanation of benefits.

- Delta Dental of Iowa
- 877-983-3582
- [www.deltadentalia.com](http://www.deltadentalia.com)

Call or access Delta website for a participating dentist directory. Search under the Delta Dental Premier Plan. Delta Dental also includes a vision discount program through EyeMed click on:
- Member Tab; then
- Vision Discount

**Summary of Benefits & Coverage**

Printed copies are available by request

**Traditional Premium Contribution Plans**

[https://das.iowa.gov/sites/default/files/hr/benefits/documents/2016e%c2%a6c/2016_SBC_Program3%2B_AFSCME%26Judicial.pdf](https://das.iowa.gov/sites/default/files/hr/benefits/documents/2016e%c2%a6c/2016_SBC_Program3%2B_AFSCME%26Judicial.pdf)

[https://das.iowa.gov/sites/default/files/hr/benefits/documents/2016e%c2%a6c/2016_SBC_IowaSelect_Contract%26Judicial.pdf](https://das.iowa.gov/sites/default/files/hr/benefits/documents/2016e%c2%a6c/2016_SBC_IowaSelect_Contract%26Judicial.pdf)

[https://das.iowa.gov/sites/default/files/hr/benefits/documents/2016e%c2%a6c/2016Blue_Access_Contract%26Judicial.pdf](https://das.iowa.gov/sites/default/files/hr/benefits/documents/2016e%c2%a6c/2016Blue_Access_Contract%26Judicial.pdf)
<table>
<thead>
<tr>
<th>HEALTH CARE FLEXIBLE SPENDING ACCOUNT and DEPENDENT CARE ASSISTANCE PROGRAM</th>
<th>800-659-3035</th>
<th><a href="https://my.asiflex.com/">https://my.asiflex.com/</a> – for individual account information</th>
</tr>
</thead>
</table>
| RETIREMENT PLANS | [IPERS - www.ipers.org](http://www.ipers.org) or call 800-622-3849  
[TIAA - www.tiaa.org/iastate](http://www.tiaa.org/iastate) or call 800-842-2776  
or the Ames Office at 866-904-7803 / 515-268-8600 |  |
| VOLUNTARY GROUP SUPPLEMENTAL RETIREMENT PLANS | [TIAA- www.tiaa.org/iastate](http://www.tiaa.org/iastate) or call 800-842-2776  
or the Ames Office at 866-904-7803 / 515-268-8600  
[VALIC – contact agent at 800-448-2542](http://www.valic.com)  
[METLIFE – contact Adam Wolff – awolff@metlife.com](http://www.metlife.com) or call 800-492-3553  
[AMERIPRISE FINANCIAL – contact Richard Keeling – Richard.j.keeling@ampf.com](http://www.ameriprise.com) or call 515-233-5402 |  |
| EYEWEAR PLAN | 800-828-9341 | [https://www.avesis.com/isu](https://www.avesis.com/isu) |
| Avesis Vision Plan |  |  |
[https://longtermcare.genworth.com/fiveseries/login.do](https://longtermcare.genworth.com/fiveseries/login.do) |  |
| EMPLOYEE ASSISTANCE PROGRAM (EAP) | 800-327-4692 OR Des Moines 515-844-6090 | [EFR Workplace Services](http://www.efr.org/wps/eap) |
| |  |  |
| VENDOR VALUE-ADDED SERVICES |  |  |
| PERKSCONNECT | Use Anytime - discount programs for State employees:  
[https://member.perksconnect.com](http://member.perksconnect.com) |  |
Member Tab/Vision Discount Program |  |
| Principal Financial Group Available When Enrolled in Basic Life |  |  |
| WILL PREPARATION ARAG/Principal | 800-546-3718 | Use Anytime  
[www.ARGwills.com/Principal](http://www.ARGwills.com/Principal)  
ISU Group number - N1460 |  |
| AXA Assistance | In U.S.-888-647-2611 Outside of U.S.-call collect 630-766-7696 | Travel Assistance |
| Principal Financial Group Available When Enrolled in Basic Life and/or Long Term Disability |  |  |
| Hearing Aid Program | 866-925-1287 | [www.americanhearingbenefits.com](http://www.americanhearingbenefits.com) |
| Oral Health Care |  | [www.epicdental.com](http://www.epicdental.com) |
| Diabetic Magazine Program |  | [www.principal.com/diabeticliving](http://www.principal.com/diabeticliving) |

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This is a summary of your benefits as a Non-Supervisory Merit employee. If there is any discrepancy between this guide and the actual plan documents, the plan documents will control in all cases.

Your enrollment via computer in AccessPlus portal or your signature on the enrollment forms authorizes:

♦ The accuracy of the benefit elections you have made, as well as the accuracy of the information about you and your dependents.
♦ ISU to make the appropriate payroll deductions (if any) from your 2017 payroll to pay your share of the benefits.
♦ Release of pertinent medical records to the insurance company when reasonably related to the health care condition for which you (spouse/partner and/or a dependent) are being treated.

A Final Note
Open Change Period Dates
October 17, 2016 after 9:00 a.m.
through
November 18, 2016 at 5:00 p.m.

To complete the enrollment process
• To verify correct enrollment - review the 2017 Benefit Confirmation Statement available on AccessPlus December 2, 2016.
• All corrections must be returned to the Benefits Office by December 9, 2016.
• A Final Benefit Statement of 2017 elections will be available on AccessPlus December 16, 2016.
• Your new medical and dental deductions will begin with your December pay.
• Your new flex, Avesis and life deductions will begin with your January pay.
• The medical plan changes effective January 1, 2017.
• Avesis Vision plan changes will be effective February 1, 2017.

Change to Group Term Basic and Voluntary Term Life Insurance or Long Term Disability
• Will be effective January 1, 2017.
  OR
• The 1st of the month following the Principal Statement of Health approval, whichever is the later.

The 2017 Spending Account contributions
• Available for expenses incurred on or after January 1, 2017.
• Daily reimbursement beginning the second Tuesday in February, 2017.

If you have any questions, and would like to speak with a Benefits Consultant please contact the University Human Resources Service Center at 515-294-4800 or 877-477-7485, send your questions via email to benefits@iastate.edu, or review the ISU Plan Web Page: http://www.hrs.iastate.edu/benefits/homepage.shtml
Updates made in AccessPlus portal or forms available:

October 17, 2016 after 9:00 a.m. to November 18, 2016 at 5:00 p.m.

START EARLY!

Benefits Web Page
http://www.hrs.iastate.edu/hrs/benefits
Click on:
“Non-Supervisory Merit (Organized)”;
“Open Change Period Information”;
“Forms”

Set up appointments or drop of forms:
University Human Resources Service Center
3810 Beardshear Hall
Phone: 515-294-4800 / 877-477-7485
Fax: 515-294-8226
E-mail: benefits@iastate.edu

REMINDER:
If you use the forms:
• Photocopy forms for your record for proof of change.
• Required for any corrections to the benefit confirmation statement.