OFFICE OF HUMAN RESOURCES

OPEN ENROLLMENT 2026

OCT 14TH through NOV 4TH

https://www.uah.edu/hr/open-enrollment

BENEFITS ROCK
'ENROLL'

Active Enrollment

Drop or Add a Dependent

Waive Coverage

WHAT IS OPEN ENROLLMENT?

Annual time of the year to review benefits plans and changes for the next year.

OCTOBER 14TH through NOVEMBER 4TH

ACTION IS REQUIRED to enroll or maintain HSA, DCFSA, or FSA for 2026. Your current election will ***not*** roll over. For these tax-favored accounts, you must elect a NEW annual contribution amount to continue payroll deductions.

NO ACTION IS REQUIRED if you do not want to make any changes to health, dental, vision, life, or disability coverage. You will keep your current benefits and these coverage(s) will roll over as-is effective Jan. 1, 2026 without taking any action.

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CHANGES OUTSIDE OF OPEN ENROLLMENT

QUALIFYING LIFE EVENT

Employees have **31 days** to make the change in their benefit elections for life events such as **marriage, divorce, birth/adoption, job change, etc.**

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80%

EMPLOYER COST

20%

EMPLOYEE COST

MEDICAL PLAN ADMINISTRATION

SELF-FUNDED PLAN

- University cost share
- University pays medical claims and administrative fees
- Premiums based on plan experience

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2026 PPO PREMIUM SCHEDULE

PPO Bi-Monthly Premium		12 Month	$ Increase	9 Month	$ Increase
Standard	Employee	$54.50	*$4.50*	$72.67	*$6.00*
	Employee + Child(ren)	$183.00	*$15.00*	$244.00	*$20.00*
	Employee + Family	$246.50	*$20.50*	$328.67	*$27.67*
Grandfathered	Employee	$39.51	*$3.26*		
	Employee + Child(ren)	$87.20	*$7.20*		
	Employee + Family	$105.46	*$8.71*		
Premium Assistance	Employee	$4.50	*$4.50*	$6.00	*$6.00*
	Employee + Child(ren)	$133.00	*$15.00*	$177.33	*$20.00*
	Employee + Family	$196.50	*$20.75*	$262.00	*$27.67*

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2026 HDHP PREMIUM SCHEDULE

HDHP Bi-Monthly Premium	12 Month	$ Increase	9 Month	$ Increase
Employee	$32.50	*$2.50*	$43.33	*$3.33*
Employee + Child(ren)	$109.00	*$9.00*	$145.33	*$12.00*
Employee + Family	$163.50	*$13.50*	$218.00	*$18.00*

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2026 VISION & DENTAL

Dental Bi-Monthly Premium	12 Month	$ Increase	9 Month	$ Increase
Employee	$15.41	*$0.74*	$20.55	*$0.99*
Employee + Child(ren)	$30.19	*$1.44*	$40.25	*$1.92*
Employee + Family	$38.57	*$1.84*	$51.43	*$2.46*

VISION Bi-Monthly Premium (no change)

	12 Month	$ Increase	9 Month	$ Increase
Employee	$4.04	$ -	$5.39	$ -
Employee + Child(ren)	$8.79	$ -	$11.72	$ -
Employee + Family	$14.15	$ -	$18.87	$ -

MEDICAL PLAN CHANGES

EFFECTIVE January 1, 2026

PPO & HIGH DEDUCTIBLE HEALTH PLANS (HDHP)

HDHP

Deductible Increase:

- Individual Plans: **$1,700 *($50 increase)***
- Family Plans: **$3,400 *($100 increase)***

HSA Limit Increase:

- Individual Plans: **$4,400 *($100 increase)***
- Family Plans: **$8,750 *($200 increase)***

PPO

Tier 1 Pharmacy Copay Increase

- **$20.00 *($5 increase)***

PPO PREMIUM ASSISTANCE PROGRAM

- Premium Assistance Program is available for benefit-eligible active employees enrolling in the PPO Health Plan.
- Employees must submit the Premium Assistance Application and furnish acceptable proof of total annual household income based on their most recently filed Federal Income Tax Return, W-2s, and 1099s.
- The amount of the discount is equal to the single plan employee premium. For 2026, the maximum amount is **$100 per month** (up to $1,200 per year).
- Application Deadlines:
  - Current Employees - Submit documentation annually during Open Enrollment.
  - Newly Eligible Employees - 30 days from date of hire/start date.
  - Application is available on HRConnection and the Open Enrollment website.

Grandfathered employees will not qualify for the Premium Assistance Program. Benefits from the Grandfathering provision and Premium Assistance Program will not be received concurrently. If a Grandfathered employee chooses to enroll in the Premium Assistance Program, they will voluntarily waive their Grandfathered status indefinitely.

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PPO PREMIUM ASSISTANCE PROGRAM

APPLY DURING OPEN ENROLLMENT TO RECEIVE ASSISTANCE IN 2026.

Total Family Size	Annual Household Income
1	$27,387.50
2	$37,012.50
3	$46,637.50
4	$56,262.50
5	$65,887.50
6	$75,512.50
7	$85,137.50
8	$94,762.50

Based on 1.75 time Federal Poverty Level. Total Family Size and Annual Household Income should reflect what was reported on your most recent Federal Tax Return.

APPLY HERE: https://www.uah.edu/hr/benefits/insurance/health

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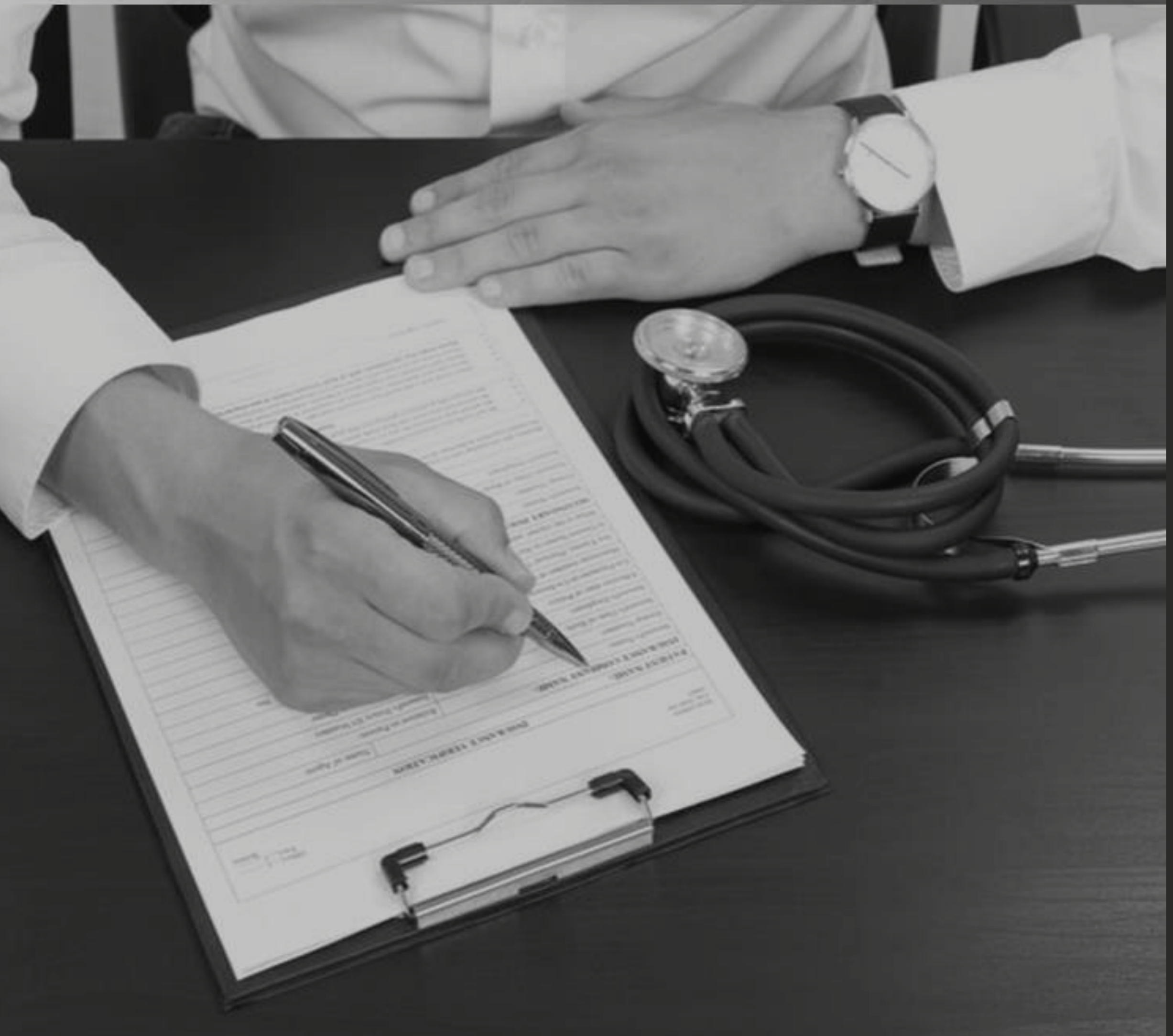
2026 PPO vs HDHP PLANS

Service	PPO* Preferred Provider Organization	HDHP* High Deductible Health Plan
Premiums	Higher	Lower
Deductibles	Lower	Higher
Member Cost Share after deductible	Copayments + Coinsurance	Coinsurance Only **(10%*)**
Annual Deductible	Medical $150 Pharmacy $150 ***(Per Person)***	Single **$1,700** **Family $3,400** ***(Aggregate)***
Out of Pocket Maximum	Single $2,500 Family $7,150 ***Applies to both medical and pharmacy***	Single$3,500 Family $7,000 ***Applies to in-network medical services***
Pharmacy	Copayments	10%*
Tax-Favored Accounts	Healthcare FSA	Health Savings Account (H.S.A)
Third Party Administrator	Both plans are administered by Blue Cross & Blue Shield of Alabama.	
Network Access	Both plans have the same network access and provider discounts.	
Preventive Services	Both plans cover FREE prevent services at no cost share to the member.	
*after deductible has been met		



WHICH PLAN IS RIGHT FOR YOU?

HDHP

- Are you healthy?
- Can you afford the deductible and coinsurance?
- Are you willing to take risk?
- Are you interested in investing HSA funds?
  - *NOT* eligible if you: have other insurance, can be claimed as a dependent, or your spouse has an FSA.

PPO

- Do you have a chronic health condition?
- Are you planning for a hospital stay?
- What is your disposable income?

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HEALTH SAVINGS ACCOUNT ELIGIBILITY

- To contribute to an HSA, you *must* be covered by UAH's qualifying HDHP.
- You cannot also be covered by a non-HDHP plan.
  - EXAMPLE: You cannot be covered secondary on a spouse's PPO plan.
  - EXAMPLE: You cannot be enrolled in Medicare.
- You cannot be listed as a dependent on another person's tax return.
- IRS considers child dependents up to age 24 if full-time students, but ACA allows children to remain on a parent's plan until age 26.
- You or your spouse cannot be enrolled in an FSA.

New Account Holders must provide identity verification through the Customer Identification Program (CIP). Inspira Financial will send you instructions for completing the CIP process. Your account must be opened within 90 days in order to receive employer contributions.

INSPIRA FLEXIBLE SPENDING ACCOUNT (FSA)

- Access your account online and through the mobile app.
- All accounts are subject to **use-it-or-lose-it** rule. Incur expenses before December 31st or forfeit remaining funds.
- **FSA STORE NOW AVAILABLE!**
    - Access to exclusive discounts.
    - Provides a comprehensive selection of FSA eligible services and products.
    - 100% eligibility guarantee with no substantiation or receipt requirement.

Flexible Spending Accounts	Annual Contribution Limit	Plan Features
Healthcare FSA	$3,300.00	• Contribute pre-tax dollars for eligible medical, dental, and vision expenses • Pay with debit care, direct deposit, or manual reimbursement
Dependent Care FSA	$7,500 **($3,750 for married couples filing separately)**	• Contribute pre-tax dollars for childcare and adult day care • Must have money availble • Direct deposit for reimbursement

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COMPARISON OF TAX-FAVORED ACCOUNTS

Tax-Favored Accounts	FSA Health Care Flexible Spending Account	H.S.A Health Savings Account
Required Insurance	Traditional PPO Plan	Enrolled in High Deductible Health Plan
Account Type	Spending	Savings
Contribution Limits	$3,300 **Regardless of single/family coverage**	Individual: **$4,400** **Family: $8,750** **$1,000 catch-up for age 50+**
Access to Funds	Up to annual election amount	Funds available as they accumulate in your account
Contributions	Employee only	Employee + Employer (shared limit) Employer contributions: $500 individual/$1,000 family
Investment of funds	No	Yes, balances over $1,000
Carry-over of funds	No, use-it or lose rule applies	Yes, funds belong to the employee
Portable	No	Yes*
Debit Card Available	Yes	Yes
Substantiation	Yes	No

Members who are no longer employed and are participating in the HDHP will incur a monthly HSA account maintenance fee.

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NEW! DOCTORS ON DEMAND

Doctor On Demand is now the preferred telemedicine provider for all Blue Cross and Blue Shield of Alabama members. Doctor On Demand will replace your telemedicine services currently offered through Teledoc, effective **January 1, 2026**. Doctor On Demand is available to benefit-eligible employees and their dependent(s) covered by UAH's PPO or HDHP medical plans.

What is Telemedicine?

This virtual medical care service grants you and your covered dependents 24/7/365 access to care. Doctors On Demand provides virtual primary care, behavioral health, and dermatology services with top doctors and therapists. You can receive treatment for non-emergency conditions such as the common cold, fever and rashes, as well as behavioral issues like anxiety, depression, and more.

- Dedicated PCP
- Family Medicine
- In-Network Referrals
- Integrated Pharmacy and Labs
- Chronic Condition Management
- Annual Check-Ups
- Integrated Therapy and Psychiatry
- 24/7 Care Team Support

dr+ on demand by Included Health

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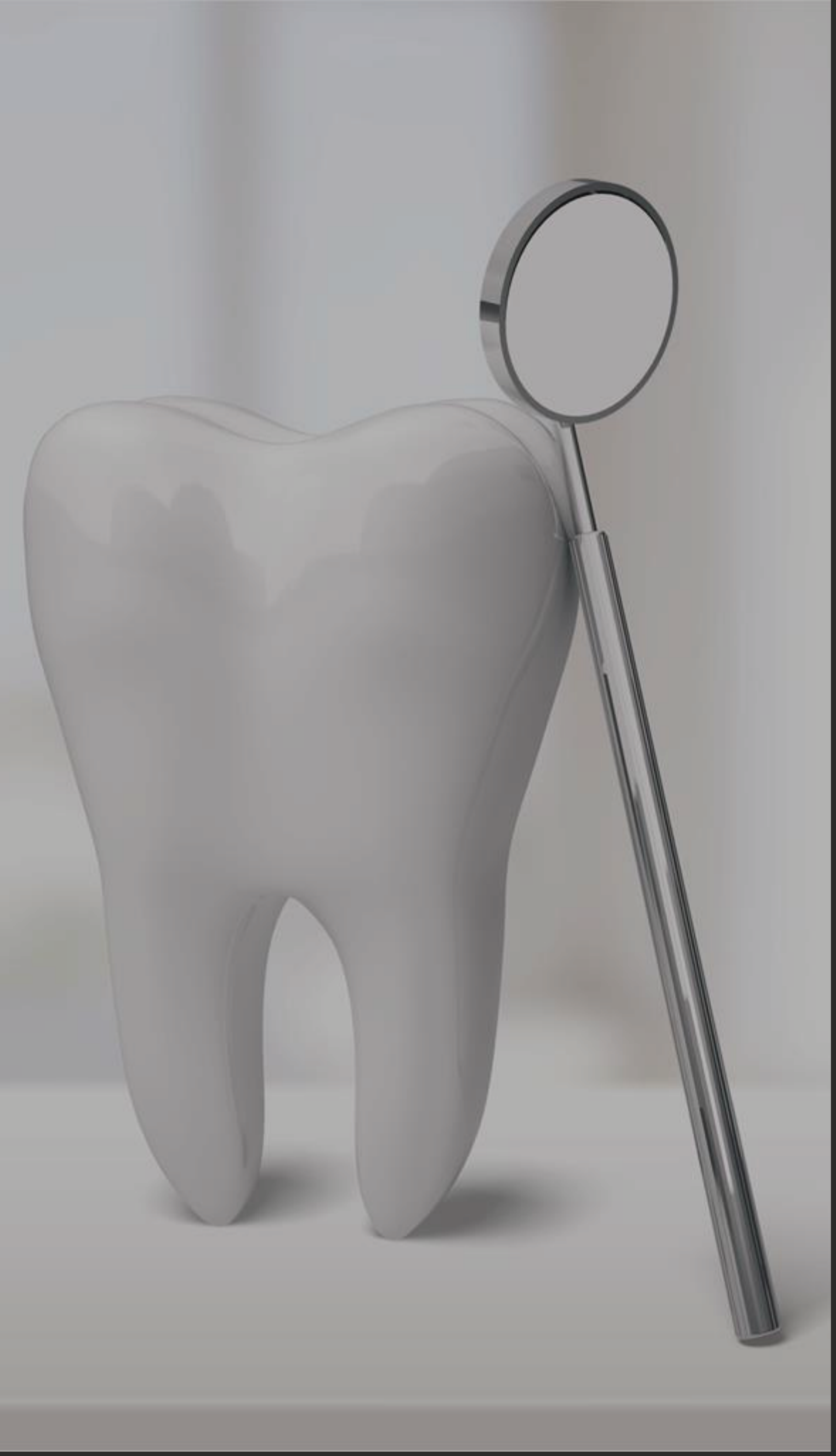

DENTAL COVERAGE SUMMARY (BCBS)

Dental Summary of Benefits	In-Network
Preventive (no deductible)	100%
Basic Services	80%
Major Services	50%
Orthodontics	50%*
Calendar Yr. Max - In-network	$ 1,500
Ortho. Lifetime Max.	$ 1,000 *
Deductible	$50 single $150 family (3 max per family)
* Over course of treatment	

WAITING PERIOD

12-month wait for new enrollees for all services *except* diagnostics and preventive.

NOTE: Waived with proof of prior coverage (if there is no more than a 63-day break in coverage)

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VISION COVERAGE SUMMARY (VSP)

Summary of Benefits	
Routine Eye Exam	$15
Prescription Glasses Copay	$25
Prescription Glasses Frame Allowance	$190
Contact Lenses Exam	$60
Contact Lenses Allowance	$150
Diabetic Eyecare Plus Program	$20
Extra Savings	
Retinal Screening	
Laser Vision Correction Discount	

Plan participants now receive ENHANCED benefits:

- Standard frame allowance of $190; *OR,*
- Contact lenses allowance of $150

PLEASE NOTE: New enrollees will *not* receive a coverage card. Give your provider your information and they will verify coverage.

SHORT-TERM DISABILITY

- Voluntary program offered to eligible faculty and staff.
- Pays 60% of weekly salary up to **$1,000 per week** for medical and maternity leaves.

OPTION 1:	OPTION 2:
14-Day Elimination Period	**29-Day** Elimination Period
Max Benefit Duration: **76 days**	Max Benefit Duration: 61 **days**

NOTE: Long-Term Disability is University Provided. Benefits begin after 90 days of disability.

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PREMIUM PAYROLL DEDUCTIONS

- Medical, Dental, and Vision insurance premiums are withheld from your check on a pre-tax basis
- Premiums are deducted from the first two checks in the months for employees paid over 12 months.
- Premiums are accelerated and deducted bi-weekly for faculty paid over 9 months to pay for coverage during the summer.

**IMPORTANT NOTE* for Academic Faculty paid over a 9-month schedule*

Insurance premium amounts may be adjusted anytime a mid-year change in coverage is made. This includes any cancellations, additions, or changes in coverage tier made during annual open enrollment or as a result of a qualifying life event. The adjustment may result in the employee owing the University an additional premium to be recouped on the following check.

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CHARGER FIT

www.uah.edu/hr/wellness

WELLNESS PROGRAMS

- Work out with Charger Fit
- Wellness Incentive Program: Earn for your efforts
- Wondr Health*: Weight loss program
- Employee Assistance Program (EAP; Provided by UAH to all eligible employees)
- Livongo* Diabetes Management
- Virta* Health Diabetes Management
- Wellness Wednesdays
- Monthly Newsletters
- Activity Challenges
- Personify - Wellness Provider

*Must be enrolled in a UAH provided medical plan to participate.

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WELLNESS PROGRAM

WELLNESS VENDOR:

- Recharge your way to healthy in 2026 with an online portal and mobile app through Personify
- Earn points for completing preventive screenings, activity challenges, UAH Wellness events, biometric screening, health assessment, and much more.
- Eligible employees who complete all program requirements will receive up to **$250 Rewards Credit** in 2026!
- Redeem rewards credit at any time for gift cards or prizes.
- Rollover credit from year-to-year to save for larger ticket items.

personify™ HEALTH

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NEW! GREAT WORK PERKS

EXPANDING YOUR EMPLOYEE DISCOUNTS

GreatWorkPerks | THE UNIVERSITY OF ALABAMA IN HUNTSVILLE

VISIT YOUR CUSTOM ENTERTAINMENT SITE:

https://uah.gwperks.com/

STEP 1
Visit the **page listed above.**

STEP 2
Click "Sign Up" at the top of the page.

STEP 3
Enter your first name, last name and email address. Then create your password to register. For registration using personal email, please use access code: **G-TH45P**

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Beneficiary Locations:

- Life insurance
- Teachers' Retirement System (TRS)
- Voluntary Retirement Plans: 403(b) / 457(b)
- HSA

IMPORTANT REMINDER:
REVIEW YOUR BENEFICIARY DESIGNATIONS

Life is uncertain and changes will occur resulting in the need for your beneficiary choices to be updated. It is very important to ensure beneficiary information is current - giving you peace of mind in knowing that your assets will be distributed to the person(s) of your choosing.

<u>Life Services Toolkit:</u>

- The Standard offers all benefit-eligible employees free resources and tools to support you and your beneficiary.
- Online tools walk you through the steps to prepare a will and create other documents such as living wills, power of attorney, advance directives, and much more.

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OPEN ENROLLMENT RESOURCES

WEBSITE

- Benefits Guide
- Presentation Slides
- Plan Summaries
- Premium Rates
- FAQ Documents
- Plan Enhancement Flyers

www.uah.edu/hr/open-enrollment

BENEFITS GUIDE

myBlueCross RESOURCES

- WellBeacon
- BlueCare Advocacy
- Access Medical Claims
- Access to Treatment Cost Estimator
- Access digital insurance card

AlabamaBlue.com/myWellBeacon
AlabamaBlue.com

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OPEN ENROLLMENT TIMELINE

OCTOBER 2025

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14 OPEN ENROLLMENT	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

NOVEMBER 2025

SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4 DEADLINE	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

KNOW YOUR BENEFITS

Benefits Guide & Open Enrollment website

VISIT HR CONNECTION

Elect your 2026 benefits

SUBMIT CHANGES BY DEADLINE

FSA, DCFSA, HSA *requires* active enrollment to contribute

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HOW TO ENROLL

STEP ONE

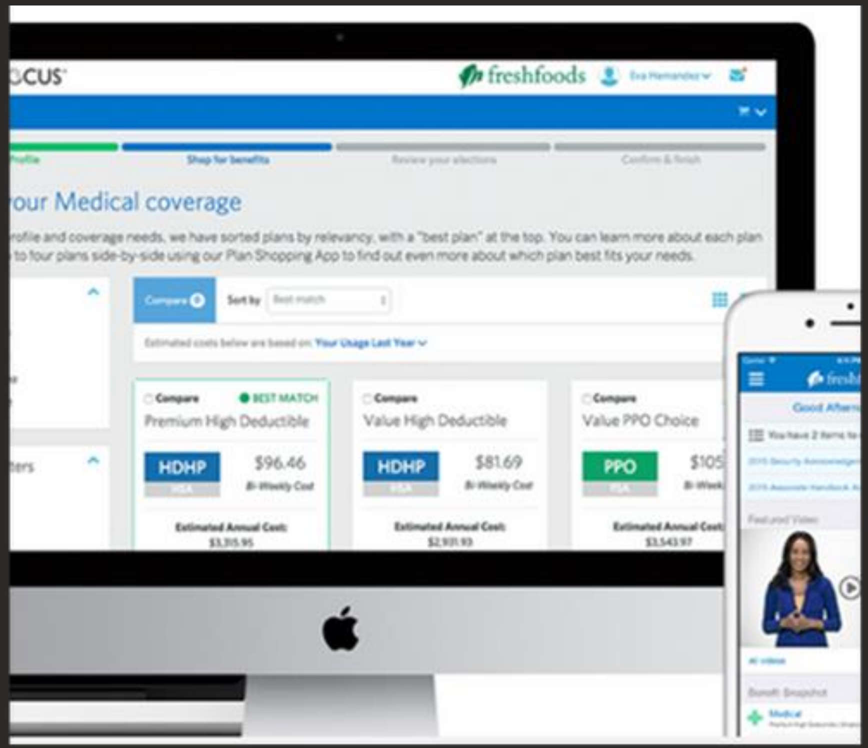
Visit the Open Enrollment website for step-by-step instructions.

Log into my.uah.edu

Select HR Connection from the HR Services menu

STEP TWO

Enter the Enrollment Portal by clicking "Enroll or View Your Benefits Now!"



STEP THREE

Upload required documentation

Complete Enrollment

Print Summary Confirmation Email

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CONTACT US

EMAIL US
benefits@uah.edu

CALL US
256.824.6640 or 256.824.6545

VISIT US
Shelbie King Hall Room 102

FOLLOW US ON FACEBOOK
UAH Human Resources &
UAH Charger Fit

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QUESTIONS

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