

MEDICAL INSURANCE

Starting in 2024, University of Nebraska Health Insurance will be administered by Blue Cross and Blue Shield of Nebraska. Please visit nebraskablue.com/unsystem or call 866 926 4498 for more information.

View a copy of the **Low Option**

Regular Plan https://nebraska.edu/-/media/Projects/UNCA/Faculty-Staff/Health-Benefits/ben_enroll_low_regular

Enhanced Plan https://nebraska.edu/-/media/Projects/UNCA/Faculty-Staff/Health-Benefits/ben_enroll_low_enhanced

View a copy of the **Basic Option**

Regular Plan https://nebraska.edu/-/media/Projects/UNCA/Faculty-Staff/Health-Benefits/ben_enroll_basic_regular

Enhanced Plan https://nebraska.edu/-/media/Projects/UNCA/Faculty-Staff/Health-Benefits/ben_enroll_basic_enhanced

View a copy of the **High Option**

Regular Plan https://nebraska.edu/-/media/Projects/UNCA/Faculty-Staff/Health-Benefits/ben_enroll_high_regular

Enhanced Plan https://nebraska.edu/-/media/Projects/UNCA/Faculty-Staff/Health-Benefits/ben_enroll_high_enhanced

Eligibility

Employee

Faculty and staff are eligible for group medical insurance coverage if they are employed in a "Regular" position with an FTE of .5 or greater or in a "Temporary" position for more than six months with an FTE of .5 or greater.

Dependents

Spouse/Husband or wife, as recognized under the laws of the state of Nebraska

- f Common law spouse if the common law marriage was contracted in a jurisdiction recognizing a common law marriage

Child

The following dependent children may be eligible for coverage:

- f Natural born or legally adopted child who has not reached the limiting age of 26
- f Stepchild who has not reached the limiting age of 26
- f Child for whom the employee has legal guardianship and who has not reached the limiting age of 26
- f Child with a mental or physical disability who has attained the limiting age of 26 may continue coverage

Employee Plus One

University benefits eligibility is extended to an Adult Designee of the same or opposite gender who meets all the

Effective Date of Coverage

Coverage is effective on the first day of the month following the employee's date of hire or eligibility. Coverage for employees hired on the first day of the month will be effective on the first day of the month. Coverage for employees hired on the first working day of the month will be effective on the actual date of hire (if first working day is Jan. 5, coverage will be effective Jan. 5).

Change in Status Guidelines

Employees may enroll, disenroll or change their medical insurance coverage category during the calendar year when a Permitted Election Change Event occurs.

Employees must enroll or make changes in coverage within 31 days of the Permitted Election Change Event. With the exception of enrollment or coverage cancellation, employees may only change their medical coverage category. Changes between medical plan "options" are not allowed.

Listed below are several Permitted Election Change Events that may allow an employee to initiate a midyear medical insurance coverage change.

- f* Change in legal marital status
- f* Change in number of dependent children
- f* Change in employment status or work schedule that results in a gain or loss of coverage eligibility
- f* Change in coverage under spouse's employer's benefits plan, if substantial

Required Documentation for Status Changes

You will be asked to supply evidence of eligibility for each dependent you are enrolling in the medical plan. The type of evidence required will vary depending on the relationship of the dependent to you, but may include birth certificates, marriage licenses and other documentation.

Coverage Effective Date as a Result of a Permitted Election Change Event

Coverage changes for Change

Employee & Child or Employee & Family coverage. If the newborn child is added, the coverage change and related increase in premiums will be effective the first of the month following the dependent's date of birth. If the employee does not complete and deliver the properly completed Dependent Information Request Form to the Campus Benefits Office within 60 days of the newborn's birth and then wants to cover the child, the child will be considered a late enrollee and benefits will not be provided to the child until the next annual NUFlex enrollment. (No coverage changes are allowed as a result of a Permitted Election Change Event.)

Do not delay completing and submitting this form while the new baby's Social Security Number is pending. Submit the form and then email your dependent's Social Security Number to the Campus Benefits Office as soon as it is issued.

Adoption or Legal Guardianship

Coverage changes due to a dependent child who is added as a result of adoption or legal guardianship will coincide with the earlier of: 1) the date of placement for adoption, or 2) the date of entry of an order granting legal guardianship or custody of the child. Placement generally means when the adoptive parents have taken legal responsibility for the child. Premiums will begin on the first day of the month following the event. The employee must provide appropriate documentation to verify the Permitted Election Change Event. Coverage for a dependent child's baby may be added to the employee's (grandparents') medical insurance policy only if the employee obtains 1) legal guardianship, or 2) adoption of the newborn child.

Marriage

Coverage changes due to marriage will be effective on the first day of the month following the date of marriage. Changes in coverage for a marriage occurring on the first day of the month will be effective immediately. The employee must provide appropriate documentation to verify the Permitted Election Change Event.

Divorce or Legal Separation

Coverage changes due to a Nebraska divorce will be effective the first day of the month following the date the divorced decree is final (6 months after date the decree is entered). If legal 3>Tj /TTid Tf .23j /T divorce will be eff

Leave of Absence

Employees may continue medical insurance coverage while on an approved leave of absence for up to two years. The employee should contact the Campus Benefits Office to establish the direct bill premium payment process.

Active Military Duty Leave of Absence

An employee who commences a leave of absence for active duty in the military may cancel medical insurance coverage during the leave. Upon return from active duty, the employee may re-enroll for medical insurance coverage without proof of insurability. The employee must provide appropriate documentation to support the date military service ended.

Annual NUFlex Enrollment

Employees may change a medical plan option or coverage category during the annual NUFlex enrollment. Proof of insurability is not required to enroll or increase coverage during the annual NUFlex enrollment.

If you are the spouse of an employee, you will become a qualified beneficiary if you lose coverage under the Plans because of any of the following qualifying events:

- (1) Your spouse dies;
- (2) Your spouse's hours of employment are reduced;
- (3) Your spouse's employment ends for any reason other than gross misconduct;
- (4) Your spouse becomes enrolled in Medicare (Part A, Part B or both) and cancels coverage; or
- (5) You become divorced [or legally separated] from your spouse. If an employee cancels coverage for his or her spouse in anticipation of a divorce [or legal separation] and a divorce [or legal separation] later occurs, then the divorce [or legal separation] will be considered a qualifying event even though the ex-spouse lost coverage earlier. If the ex-spouse notifies the COBRA Plan Administrator within 60 days of the decree of dissolution of marriage date and can establish that the employee canceled the coverage earlier in anticipation of the divorce [or legal separation], then COBRA coverage may be available for the period after the divorce [or legal separation].

Your dependent children will become qualified beneficiaries if they lose coverage under the Plans because of any of the following qualifying events:

- (1) The parent employee dies;

Health Risk Assessment

In addition to your insured benefits, the University of Nebraska has a commitment to our employees' wellness. As part of that commitment, we offer all active (benefits eligible) employees, retirees and ancillary insured the opportunity to complete a Health Risk Assessment (HRA).

The HRA is a valuable educational tool designed to help you learn important information about your current health status and how to improve it. Participation is voluntary;

Medicaid and the Children's Health Insurance Program (CHIP) Offer or Low Cost Health Coverage to Children and Families

If you are eligible