> Annual training
> Annual enrollment
> Staff Council
> Telework procedures when quarantined
> FMLA (Unum) reminders
> Voting policy
> Winter Break
> ePAF reminders
> Payroll updates
> Exempt leave time – auto approval
Annual Training

1. Building a Foundation: Discrimination, Prevention and Title IX
2. Global Cybersecurity Basics
3. Towards an Inclusive UM System (not available yet)
4. University of Missouri System Campus Emergency Alert Training

Notification Dates for October:
Oct 20th Reminder message sent from HRSC to faculty, staff, and student employees

Oct 22nd Notification of direct reports non-completion message from HRSC to supervisors with direct reports

Oct 23rd Notification of direct reports non-completion message from myLearn (Skillsoft) to supervisors with direct reports

Due December 22nd
2021 Annual Enrollment

October 26 – November 6, 2020
Today we’ll talk about…

- Introduction
  - What is Annual Enrollment?

- Insurance options
  - Medical insurance plans
  - Ancillary insurance plans
  - Additional benefits

- HSAs and FSAs

- Conclusion
Introduction

2021 Annual Enrollment
What is Annual Enrollment?

- The period of time during which faculty, staff and other eligible parties are able to make changes to their insurance plan elections*

- Generally, two weeks each fall; this year:
  - October 26 – November 6, 2020
  - for all benefit-eligible faculty, staff and retirees**

* Some changes may be made outside of Annual Enrollment if you have experienced an eligible family status change.

** Retirees are not eligible for some things discussed in this presentation, such as a pre-tax premium and some decision-making tools geared for employees' insurance options. Retirees will receive their own decision-making guides and forms in the mail in October.
INSURANCE OPTIONS

2021 Annual Enrollment
We’ll talk about in this section

- Medical insurance plans
  - Healthy Savings Plan
  - Custom Network Plan (Columbia and St. Louis)
  - PPO Plan (for those employed by the UMKC business unit, this includes the tiered feature)

- Ancillary insurance plans
  - Dental
  - Vision
  - Life
  - Long Term Disability
  - Accidental Death and Dismemberment
2021 Plan Year Goals

- Minimize premium increases for all medical plans
- Align with market regarding benefit design (deductibles, copays, etc.)

Better Than Market
Consistent with Market

<table>
<thead>
<tr>
<th>Plan</th>
<th>Plan Value</th>
<th>Employee Deductible</th>
<th>Coinsurance</th>
<th>Copays</th>
<th>Out of Pocket Maximum</th>
<th>Emergency Room</th>
<th>Urgent Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CNP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PPO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Medical insurance options and premiums

<table>
<thead>
<tr>
<th>Medical plan option</th>
<th>Coverage level</th>
<th>You pay in 2020 (monthly premium)</th>
<th>You will pay in 2021 (monthly premium)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Healthy Savings Plan</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Lowest premium</td>
<td>Self</td>
<td>$44</td>
<td>$58</td>
</tr>
<tr>
<td>• Combined medical and℞ deductible</td>
<td>Self and spouse</td>
<td>$154</td>
<td>$160</td>
</tr>
<tr>
<td>• HSA w/ University contribution</td>
<td>Self and children</td>
<td>$129</td>
<td>$133</td>
</tr>
<tr>
<td>• Broad network</td>
<td>Self and family</td>
<td>$254</td>
<td>$258</td>
</tr>
<tr>
<td><strong>Custom Network Plan (Columbia and St. Louis area)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Mid-level premium</td>
<td>Self</td>
<td>$83</td>
<td>$84</td>
</tr>
<tr>
<td>• Medical deductible; separateℜ deductible</td>
<td>Self and spouse</td>
<td>$231</td>
<td>$232</td>
</tr>
<tr>
<td>• Focused network</td>
<td>Self and children</td>
<td>$200</td>
<td>$203</td>
</tr>
<tr>
<td>• Columbia: MU Health providers</td>
<td>Self and family</td>
<td>$365</td>
<td>$366</td>
</tr>
<tr>
<td>• St. Louis: Mercy health providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Other providers are considered out-of-network, even if they accept UHC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PPO Plan (includes Kansas City Tiered Feature)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Highest premium</td>
<td>Self</td>
<td>$171</td>
<td>$176</td>
</tr>
<tr>
<td>• Medical deductible; separateℜ deductible</td>
<td>Self and spouse</td>
<td>$411</td>
<td>$417</td>
</tr>
<tr>
<td>• Broad network</td>
<td>Self and children</td>
<td>$366</td>
<td>$374</td>
</tr>
<tr>
<td>• Tiered Feature: In-network providers are divided into categories with different price points.</td>
<td>Self and family</td>
<td>$629</td>
<td>$632</td>
</tr>
</tbody>
</table>
Plan changes for 2021: Healthy Savings

<table>
<thead>
<tr>
<th>Service</th>
<th>2020</th>
<th>2021</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical deductible</strong></td>
<td>$1,500/self</td>
<td>$1,750/self</td>
<td>$3,000/family*</td>
<td>$3,500/family*</td>
</tr>
<tr>
<td></td>
<td>$3,000/family*</td>
<td>$3,500/family*</td>
<td>(combined)</td>
<td>(combined)</td>
</tr>
<tr>
<td><strong>Primary care visit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription deductible</strong></td>
<td>10% after deductible</td>
<td>15% after deductible</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medical plan out-of-pocket limit</strong></td>
<td>$3,000/self</td>
<td>$3,500/self</td>
<td>$6,000/family*</td>
<td>$7,000/family*</td>
</tr>
<tr>
<td></td>
<td>(combined)</td>
<td>(combined)</td>
<td>(combined)</td>
<td>(combined)</td>
</tr>
<tr>
<td><strong>Specialist office visit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription drug out-of-pocket limit</strong></td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Urgent care</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Lab and x-ray</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Co-insurance</strong></td>
<td>10% after deductible</td>
<td>15% after deductible</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Outpatient visit</strong></td>
<td></td>
<td></td>
<td>10% after deductible</td>
<td>15% after deductible</td>
</tr>
<tr>
<td><strong>Prescription drug: Retail</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Formulary generic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Non-formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- 10% after deductible</td>
<td></td>
<td></td>
<td>10% after deductible</td>
<td>15% after deductible</td>
</tr>
<tr>
<td><strong>Emergency room</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Ambulance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription drug: Mail</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Formulary generic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Non-formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- 10% after deductible</td>
<td></td>
<td></td>
<td>10% after deductible</td>
<td>15% after deductible</td>
</tr>
</tbody>
</table>

* “Self” and “family” are different for the Healthy Savings Plan than the other plan options.
** 90-day fill/refill for mail orders; includes MUHC pharmacies.
# Plan changes for 2021: Custom Network

**What you pay for in-network coverage - Custom Network Plan (2020/2021)**

<table>
<thead>
<tr>
<th></th>
<th>2020</th>
<th>2021</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical deductible</td>
<td>$0</td>
<td>$200/self, $600/family*</td>
<td>$10 copay/visit (incl. Mizzou Quick Care)</td>
<td>$15 copay/visit (incl. Mizzou Quick Care)</td>
</tr>
<tr>
<td>Prescription deductible</td>
<td>Retail: $50/person, Mail-order: $0/person</td>
<td>Retail: $50/person, Mail-order: $0/person</td>
<td>Specialist office visit</td>
<td>$30 copay/visit</td>
</tr>
<tr>
<td>Medical plan</td>
<td>$3,500/self, $7,000/family*</td>
<td>$3,500/self, $7,000/family*</td>
<td>Urgent care</td>
<td>$50 copay/visit</td>
</tr>
<tr>
<td>out-of-pocket limit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription drug</td>
<td>$4,650/self, $9,300/family*</td>
<td>$5,050/self, $10,100/family*</td>
<td>Lab and x-ray***</td>
<td>No charge</td>
</tr>
<tr>
<td>out-of-pocket limit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive services</td>
<td>$0</td>
<td>$0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Co-insurance</td>
<td>0%</td>
<td>10%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription drug:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retail</td>
<td>Greater of:</td>
<td>Greater of:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formulary generic</td>
<td>$7 copay / 20% coinsurance</td>
<td>$7 copay / 20% coinsurance</td>
<td>Emergency room</td>
<td>$250 copay/visit</td>
</tr>
<tr>
<td>Formulary brand</td>
<td>$15 copay / 25% coinsurance</td>
<td>$15 copay / 25% coinsurance</td>
<td>Ambulance</td>
<td>$100 copay/occurrence</td>
</tr>
<tr>
<td>Non-formulary brand</td>
<td>$30 copay / 50% coinsurance</td>
<td>$30 copay / 50% coinsurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription drug:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mail**</td>
<td>Greater of:</td>
<td>Greater of:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formulary generic</td>
<td>$15 copay / 20% coinsurance</td>
<td>$15 copay / 20% coinsurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formulary brand</td>
<td>$30 copay / 25% coinsurance</td>
<td>$30 copay / 25% coinsurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-formulary brand</td>
<td>$60 copay / 50% coinsurance</td>
<td>$60 copay / 50% coinsurance</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* "Self" and "family" are different for the Healthy Savings Plan than the other plan options.
** 90-day fill/refill for mail orders; includes MUHC pharmacies.
***"For lab and x-ray services, "basic" includes services such as x-ray, blood work, lipid panel, etc. "advanced" includes services such as CT scan, PET scan, MRI, etc.
**Plan changes for 2021: PPO** (Columbia, Rolla and St. Louis)

|------------------------------------------------------------|------|------|------|------|
| **Medical deductible**                                     | Rolla: $350/self; $1,050/family*  
Columbia and St. Louis: $500/self; $1,500/family* | Rolla: $500/self; $1,500/family*  
Columbia and St. Louis: $800/self; $2,400/family* | **Primary care visit** | $20 copay/visit | $20 copay/visit |
| **Prescription deductible**                                | Retail: $75/person  
Mail-order: $0/person | Retail: $75/person  
Mail-order: $0/person | **Specialist office visit** | $30 copay/visit | $40 copay/visit |
| **Medical plan out-of-pocket limit**                       | $3,500/self  
$7,000/family* | $3,500/self  
$7,000/family* | **Urgent care** | $50 copay/visit | $50 copay/visit |
| **Prescription drug out-of-pocket limit**                  | $4,650/self  
$9,300/family* | $5,050/self  
$10,100/family* | **Lab and x-ray** | Applicable co-insurance after deductible^ | Applicable co-insurance after deductible^ |
| **Preventive services**                                    | $0 | $0 | **Outpatient visit** | $100 copay/visit after deductible | Applicable co-insurance after deductible^ |
| **Co-insurance^**                                          | Rolla: 0% after deductible;  
Columbia & St. Louis: 10% after deductible | Rolla: 10% after deductible;  
Columbia & St. Louis: 20% after deductible | **Inpatient visit** (includes maternity delivery) | $300 copay/visit after deductible | Applicable co-insurance after deductible^ |
| **Prescription drug: Retail**                              | Greater of:  
- $7 copay / 20% coinsurance  
- $15 copay / 25% coinsurance  
- $30 copay / 50% coinsurance | Greater of:  
- $7 copay / 20% coinsurance  
- $15 copay / 25% coinsurance  
- $30 copay / 50% coinsurance | **Emergency room** | $250 copay/visit after deductible | $250 copay/visit after deductible |
| **Prescription drug: Mail**                                | Greater of:  
- $15 copay / 20% coinsurance  
- $30 copay / 25% coinsurance  
- $60 copay / 50% coinsurance | Greater of:  
- $15 copay / 20% coinsurance  
- $30 copay / 25% coinsurance  
- $60 copay / 50% coinsurance | **Ambulance** | $100 copay/occurrence | $200 copay/occurrence |

*“Self” and “family” are different for the Healthy Savings Plan than the other plan options.*

**90-day fill/refill for mail orders; includes MUHC pharmacies.**
# Plan changes for 2021: PPO (Kansas City)

## What you pay for in-network coverage - PPO Plan (2020/2021)

<table>
<thead>
<tr>
<th></th>
<th>2020</th>
<th>2021</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical deductible</strong></td>
<td>$350/self; $1,050/family*</td>
<td>$500/self; $1,500/family*</td>
<td>Primary care visit</td>
<td>Tier 1 (♥♥): $10 copay/visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tier 2 (♥): $20 copay/visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tier 1 (♥♥): $15 copay/visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tier 2 (♥): $25 copay/visit</td>
</tr>
<tr>
<td><strong>Prescription deductible</strong></td>
<td>Retail: $75/person</td>
<td>Retail: $75/person</td>
<td>Specialist office visit</td>
<td>Tier 1 (♥♥): $25 copay/visit</td>
</tr>
<tr>
<td></td>
<td>Mail-order: $0/person</td>
<td>Mail-order: $0/person</td>
<td></td>
<td>Tier 2 (♥): $30 copay/visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tier 1 (♥♥): $35 copay/visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tier 2 (♥): $40 copay/visit</td>
</tr>
<tr>
<td><strong>Medical plan out-of-pocket limit</strong></td>
<td>$3,500/self; $7,000/family*</td>
<td>$3,500/self; $7,000/family*</td>
<td>Urgent care</td>
<td>$50 copay/visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$50 copay/visit</td>
</tr>
<tr>
<td><strong>Prescription drug out-of-pocket limit</strong></td>
<td>$4,650/self; $9,300/family*</td>
<td>$5,050/self; $10,100/family*</td>
<td>Lab and x-ray</td>
<td>Applicable co-insurance after deductible^</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Applicable co-insurance after deductible^</td>
</tr>
<tr>
<td><strong>Preventive services</strong></td>
<td>$0</td>
<td>$0</td>
<td>Outpatient visit</td>
<td>$100 copay /visit after deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Applicable co-insurance after deductible^</td>
</tr>
<tr>
<td><strong>Co-insurance^</strong></td>
<td>Designated: 0% after deductible</td>
<td>Designated: 10% after deductible</td>
<td>Inpatient visit (includes maternity delivery)</td>
<td>$300 copay /confinement after deductible</td>
</tr>
<tr>
<td></td>
<td>Regular: 10% after deductible</td>
<td>Regular: 20% after deductible</td>
<td></td>
<td>Applicable co-insurance after deductible^</td>
</tr>
<tr>
<td><strong>Prescription drug: Retail</strong></td>
<td>Greater of: $7 copay / 20% coinsurance</td>
<td>Greater of: $7 copay / 20% coinsurance</td>
<td>Emergency room</td>
<td>$250 copay/visit after deductible</td>
</tr>
<tr>
<td>Formulary generic</td>
<td></td>
<td></td>
<td></td>
<td>$250 copay/visit after deductible</td>
</tr>
<tr>
<td>Formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription drug: Mail</strong></td>
<td>Greater of: $15 copay / 20% coinsurance</td>
<td>Greater of: $15 copay / 20% coinsurance</td>
<td>Ambulance</td>
<td>$100 copay/occurrence</td>
</tr>
<tr>
<td>Formulary generic</td>
<td></td>
<td></td>
<td></td>
<td>$200 copay/occurrence</td>
</tr>
<tr>
<td>Formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-formulary brand</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription drug: Mail</strong></td>
<td>Greater of: $30 copay / 25% coinsurance</td>
<td>Greater of: $30 copay / 25% coinsurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

^ "Self" and "family" are different for the Healthy Savings Plan than the other plan options.
** 90-day fill/refill for mail orders; includes MUHC pharmacies.
Virtual visits

- Lower cost than urgent care or emergency room
  - Talk to a doctor from your mobile device or computer without an appointment, any time
  - Great option when your doctor is not available or if you get sick while traveling with a non-emergency health situation

- Accessing virtual visits
  - Columbia CNP can access through MUHC’s video visits portal
  - All other plans can access through myuhc.com or the Health4Me app

- Conditions commonly treated:
  - Cold, flu, bronchitis, pink eye, rash, sinus problems, sore throat, etc.

- Learn more at umurl.us/virtualvis
Prescription options

- **Retail Pharmacies**
  - Physical pharmacy you walk-in to.
  - Supply limited to 31 days

- **Mail-Order Pharmacy**
  - Send prescriptions directly to your home. Up to 90-day supply
  - Ideal for maintenance medications or long-term therapies
  - Receive a 90-day supply for the same cost as 60-day supply

- **Mizzou Pharmacy**
  - Treated as mail-order, meaning they are able to offer prescriptions at the same reduced, mail-order costs

- **Specialty Pharmacy Services**
  - Supplied by Accredo for all plans
  - PPO, Columbia CNP and HSP members may also use Mizzou Pharmacy
Other insurance plans

- No changes to premiums or plan design for
  - Dental
  - Vision
  - Life (including spouse and dependent)
  - Accidental Death and Dismemberment
  - Long Term Disability
Insurance-related notices

- Notices will be made available during the enrollment process in myHR, they are also always available at umurl.us/notice
  - Women’s Health and Cancer Rights Act of 1998
  - Your Right to Receive A Notice of Privacy Practices
  - Notice to Employees of Coverage Options
  - Premium Assistance under Medicaid and the Children’s Health Insurance Program (CHIP)
  - Medicare Modernization Act (MMA)
  - Newborns’ and Mothers’ Health Protection Act of 1996
Other Benefits

- **Tuition Assistance***
  - **Active employees:** 75% of tuition/supplemental fees.
  - **Spouse/dependents****: 50% tuition waived for UM System college-level credit courses up to the allotted limit.
  - **Retirees:** 100%
  - Deadlines for requests are due mid-semester; learn more at umurl.us/tuition.

- **Employee Assistance Program**
  - Confidential, professional service provided to all faculty/staff, their families, retirees and organizational work units. Visit umurl.us/EAP for more.

- **Shared Leave Program**
  - Eligible employees can donate accrued vacation leave benefits to a pool for employees who have experienced certain catastrophic events and have exhausted other sources of paid leave. Visit umurl.us/shrdlv for more.

* Eligibility requirements apply; visit umurl/us/tuition for information on eligibility and other deadlines.

**Eligible employee must have one year of continuous full-time service in a fully benefit-eligible position before spouse/dependents are eligible.
HSAs and FSAs

2021 Annual Enrollment
Health savings account (HSA)

About the account

- University contributes
  - Employee: $400
  - Employee & Spouse: $800
  - Employee & Children: $800
  - Employee & Family: $1,200

- Use it for medical, prescription, dental and vision expenses

- Unused funds roll over from year to year

- Funds must be available prior to use

- If you’re switching from a Health FSA to an HSA in 2021, your FSA must have a zero balance by 12/31/20, or it will delay contributions to your HSA until 4/1/21.

About eligibility

- Eligibility requirements
  - Must be in a high-deductible plan
    (the Healthy Savings Plan is the University’s IRS-designated high-deductible plan)
  - Cannot be claimed as a dependent on some else’s taxes
  - Other coverage may disqualify you

- IRS contribution limits for 2021:
  - $3,600 per individual
    ($1,000 additional catch-up for 55 or older)
  - $7,200 per family
    ($1,000 additional catch-up for 55 or older)

- If you leave, you take funds with you
Flexible spending account (Health Care FSA)

About the account
- University does not contribute
- Use it for medical, prescription, dental and vision expenses
- Cannot roll over funds
  - 2.5 month grace period allows extra time to incur expenses through March 15 of following year
- ASI FlexCard option
- Enrollment does not automatically roll over from one plan year to the next.
  - If you wish to contribute funds in 2021, you must re-enroll during Annual Enrollment.

About eligibility
- Cannot be enrolled in the Healthy Savings Plan
- IRS contribution limits for 2021:
  - $2,750 for individual
- If you leave the University, you will no longer be eligible to participate in the FSA
  - Any remaining funds can only be used for expenses incurred prior to coverage end date

* If you have an FSA in 2020 and are changing to the Healthy Savings Plan with an HSA, your 2020 FSA must have a zero balance by December 31. A balance of any other amount will prevent you and the university from contributing to your HSA until April 1.
Flexible spending account (Dependent Care FSA)

**About the account**
- Use it for out-of-pocket childcare and/or elder care dependent expenses
- Funds must be available prior to use.
- Enrollment does not automatically roll over from one plan year to the next.
  - If you wish to contribute funds in 2021, you must re-enroll during Annual Enrollment.

**About eligibility**
- Any benefit eligible employee may enroll in a Dependent Care FSA, even those enrolled in the Healthy Savings Plan
- IRS contribution limits for 2021:
  - $5,000 for family
CONCLUSION

2021 Annual Enrollment
Life & LTD Evidence of Insurability

- Evidence of Insurability will be required for any increases to coverage during the Annual Enrollment Period.
- If coverage is elected that requires evidence of insurability:
  - Unum will email your University of Missouri account with a link to your personalized Evidence of Insurability application in early December 2020.
    - The Email will come from TheUnumClientServiceCenter@unum.com and the subject line will read: 'Your Recent Insurance Election - Action requested'.
  - If approved, coverage will become effective January 1, 2021, or upon approval by Unum if after January 1.
Proof of Relationship Requirement

- Proof of Relationship must be provided for any new dependents enrolled.
- Faculty & Staff will have 31 days from the closing of Annual Enrollment to provide the documentation.
- Accepted documentation can be found at: http://umurl.us/proof
- If documentation is not submitted to the UM System Office of HR by December 7, 2020 dependent(s) will be removed from coverage.
Confirmation Statement Changes

- When elections are submitted through myHR an email will be sent to your University account letting you know your enrollment has been submitted.
  - If you don’t receive an email, you have not completed your enrollment.
- Confirmation Statements will be available through myHR in mid-December.
  - An email will be sent to your University account once your confirmation statement is ready to be viewed and printed through myHR.
There’s help!

- The 2021 Benefits Guide has many of the answers you’re looking for.
- Regularly check the Annual Enrollment webpage at: umurl.us/enrollment
  - Updates will always appear there
  - Schedule one-on-one meetings with your campus HR Generalist
- Contact your local HR Generalist or call the HR Service Center at (573) 882-2146 or (800) 488-5288
- UnitedHealthcare has tools available to help
  - Visit the Annual Enrollment webpage for a list

Remember to review and make changes between October 26 and November 6!
Visit umurl.us/benefits for more

HR Service Center
umurl.us/hrsc
(573) 882-2146
hrservicecenter@umsystem.edu
Staff Council

- Advocacy activities
- Involvement activities
- Current budget
- Request for administration support of staff involvement with Council and activities
- Staff morale
Telework Procedures When Quarantined

Telework is provisionally approved due to COVID for the following reasons:

- Employee is required to quarantine (remain off campus) by a health care provider (Student Health, Primary Care Physician, Health Department).
- Employee is experiencing COVID-19 symptoms and is seeking a medical diagnosis.
- Employee is caring for an individual who is subject to an order or who has been advised by a health care provider to quarantine or isolate.
- Employee is caring for their child who is in need of care due to closures or limits in operations of a school, day care center or other provider.

Provisional Telework is not long term and does not apply to all positions.
Next Steps:

> Student Health contacts Human Resources (HR).

> HR contacts the employee to determine if they are eligible to telework and/or discuss what leave would apply (HR-700 Policy).

> If telework is authorized, employee completes the electronic telework arrangement form (https://www.umsystem.edu/ums/hr/working-through-covid-19).
The University has an obligation to ensure employees are protected under FMLA (Family Medical Leave Act) if they or a family member has a qualifying medical condition.

Unum is now our vendor partner for this (5/1/20).
FMLA (Unum) Reminders

Employee Responsibilities

> Provide 30-day advance notice where the leave is foreseeable or as soon as possible.
> Provide sufficient information regarding absences from work for the University to determine whether FMLA applies.*
> Submit the appropriate paperwork within the specified time.*
> Discuss the need for intermittent leave with their supervisor.
> Let supervisors know if any absences are related to the FMLA condition (such as follow up doctor or physical therapy appointments).

*FMLA is not an optional leave. By policy, employees must provide information when qualifying conditions may exist.
FMLA (Unum) Reminders

Supervisor Responsibilities

- Most likely source for learning of employees’ need for FML.
- Must gather enough information from employees when they are absent to determine whether FML applies.
- Must direct the employee to contact Unum or S&T HR immediately upon learning of or believing that the condition may qualify for FML.
  - Managers or S&T HR may also contact Unum on behalf of their employees to ensure the process begins.
- Ensure that FMLA is appropriately noted on timesheets and leave summaries.
- Ensure that employees have medical clearance to return to work before working when they are returning from leave.
- Maintain confidentiality of any medical information. Share only on a “need to know” basis.
FMLA (Unum) Reminders

FMLA Administrator (Unum) Responsibilities

- Work with employees and supervisors to determine whether absences qualify for FML.
- Send out letters and forms to employees who have qualifying events.
- Track FML leave usage.
- Advise employees and supervisors when FML is used.
- Coordinate the use of FML with other University leave programs (S&T HR and UM Leave Team)
CRR 340.150 Voting
HR Policy HR-411 Voting

Compliance Review
Any employee who is qualified and eligible to vote in any election held within the State of Missouri shall be excused from duty for a period necessary to allow three (3) successive hours for the purpose of voting, such period to include any off-duty time between the opening and closing of the polls.

The employee shall be paid for any time requiring absence from duty to allow three (3) successive hours; provided, however, that such absence is requested prior to election day.

The supervisor shall have the right to specify the time an employee may be absent for voting.

An employee whose hours of work permit three (3) successive hours between the opening and closing of the polls when not on duty, will not be eligible for any paid time off for the purpose of voting.
Employees whose hours of work give them three (3) successive hours on election day between the opening and the closing of the polls when they are not on duty with the University of Missouri will not be eligible for any paid time off for the purpose of voting. (CRR)

<table>
<thead>
<tr>
<th>Poll Hours</th>
<th>Work Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:00 AM</td>
<td>4:00 AM</td>
</tr>
<tr>
<td>7:00 AM</td>
<td>5:00 AM</td>
</tr>
<tr>
<td>8:00 AM</td>
<td>6:00 AM</td>
</tr>
<tr>
<td>9:00 AM</td>
<td>7:00 AM</td>
</tr>
<tr>
<td>10:00 AM</td>
<td>8:00 AM</td>
</tr>
<tr>
<td>11:00 AM</td>
<td>9:00 AM</td>
</tr>
<tr>
<td>12:00 PM</td>
<td>10:00 AM</td>
</tr>
<tr>
<td>1:00 PM</td>
<td>11:00 AM</td>
</tr>
<tr>
<td>2:00 PM</td>
<td>12:00 PM</td>
</tr>
<tr>
<td>3:00 PM</td>
<td>1:00 PM</td>
</tr>
<tr>
<td>4:00 PM</td>
<td>2:00 PM</td>
</tr>
<tr>
<td>5:00 PM</td>
<td>3:00 PM</td>
</tr>
<tr>
<td>6:00 PM</td>
<td>4:00 PM</td>
</tr>
<tr>
<td>7:00 PM (Close)</td>
<td>5:00 PM (Open)</td>
</tr>
</tbody>
</table>

3 or more consecutive hours to vote: Not eligible
In providing the period of three (3) successive hours between the opening and closing of the polls if any scheduled working time is involved, the employee shall be paid for that part of the scheduled working time for which it is necessary for the employee to be absent; provided, however, that the employee has, prior to election day, contacted their supervisor and requested to be absent from work for the purpose of voting. (CRR)
In providing the period of three (3) successive hours between the opening and closing of the polls if any scheduled working time is involved, the employee shall be paid for that part of the scheduled working time for which it is necessary for the employee to be absent; provided, however, that the employee has, prior to election day, contacted their supervisor and requested to be absent from work for the purpose of voting. (CRR)
An employee who commutes **should arrange to cast an absentee ballot** when, because of his/her travel arrangements, the voting place **cannot be reached within the three (3) successive hours** between the opening and closing of the polls.
To maintain work coverage, supervisors can specify the time their employees may be absent for voting.

Employees need to request time off to vote before election day.

Vacation or personal leave may be approved for employees who need time off beyond what is provided by policy.

Employees may not be able to go to the polls right when they open or after work due to other obligations.

Lines at the polling places may be long or slow.

With prior supervisor approval, employees may use vacation or personal leave to extend their lunch break to vote.
Per the CRRs, the University will operate under a reduced operation plan during the period starting the day after Christmas Day holiday is observed and running through the end of the day before New Year’s Day holiday is observed.

Employees **must not work** without prior supervisory approval during Winter Break.

Employees **who are required to work** during Winter Break will receive hours for use at a later time but the hours must be used before November 30 of the following year.
Winter Break

Employees who are already off during this time, due to other types of leave, may not be eligible to receive Winter Break.

Contact Human Resources with policy questions about Winter Break.

To learn more about this policy and restrictions, read [HR-415 Winter Break Leave](#) and [CRR-340.045 Winter Break Reduced Operations](#).

Payroll will send communication regarding Winter Break Leave Procedures for 2020.
ePAF Reminders

- Reports to changes - Process ePAFs
  - Time and Labor approvals
  - Reminders for Annual Training
  - ePerformance
  - Telework arrangements
- Location Code
  - If department moves to another building, etc., let HR know.
- Student ePAFs - delays
  - Pay rate change approvals
  - Student Employee Registration
Monthly Payroll

> Early monthly payroll cutoff for November and December (JED changes)
  > November 11-12
  > December 9-10

> ePAF deadlines earlier
Biweekly Payroll

- Payroll will be processed during Winter Break
- Managers will need to make arrangements to approve payroll during Winter Break
- Payroll will send out detailed information closer to time
Exempt Leave Time-Auto Approval

- Auto approval - effective 10/01/2020
- Eliminates the need for approver/supervisor to approve
  - Employee enters leave time
  - Time Admin runs/converts to approved time
- Leave time entered for dates prior to 10/01/2020 still need approval
- Unapproved leave time was causing issues
  - Employees close to vacation max would not receive accruals due to pending unapproved time
Exempt Leave Time-Auto Approval

- Managers/ supervisors still expected to review employees’ time to ensure accuracy
- No change to non-exempt employees
- Email from Amy McKenzie/ UM MU Payroll Shared Services sent 10/03/2020 at 7:20am with more information
Questions?
Thank you for attending.

We appreciate all you do in support of our campus!