

BENEFITS GUIDE

PLAN YEAR POPULATION



2026

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This publication contains important information about your employee benefit program. **Please read thoroughly.**

This benefit guide is only intended to highlight some of the major benefit provisions of the company plan and should not be relied upon as a complete detailed representation of the plan. Please refer to the plan’s summary plan descriptions for further detail. Should this guide differ from the summary plan descriptions, the summary plan descriptions prevail.

Medical Insurance

Medical insurance continues to be administered by Cigna. Below is a high-level description of the plan. Please refer to the following pages for monthly employee contributions.

Medical Coverage Details

	PPO		QHDHP	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Medical Coverage Details				
Calendar Year Deductible				
Individual	\$1,000	\$2,000	\$2,000	\$4,000
Family	\$2,000*	\$4,000	\$4,000	\$8,000
Out-of-Pocket Maximum (includes deductibles and copays)				
Individual	\$3,000	\$6,000	\$3,500	\$7,000
Family	\$6,000*	\$12,000	\$7,000	\$14,000
Coinsurance				
Member Pays	10%	30%	20%	40%
Physician Office Visits				
Preventive Care	100% covered	30% after deductible	100% covered	40% after deductible
Primary Care	\$20 copay	30% after deductible	20% after deductible	40% after deductible
Specialist	\$40 copay	30% after deductible	20% after deductible	40% after deductible
MDLIVE	100% covered	Not covered	100% covered	Not covered
Urgent Care	\$75 copay	\$75 copay	20% after deductible	20% after deductible
Hospital Services				
Inpatient	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Outpatient	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Emergency Room	\$250 copay	\$250 copay	20% after in-network deductible	
Prescription Drug Coverage Details				
Retail (31-day supply limit)				
Tier 1	\$10 copay	50% after deductible	20% after deductible	40% after deductible
Tier 2	\$35 copay	50% after deductible	20% after deductible	40% after deductible
Tier 3	\$60 copay	50% after deductible	20% after deductible	40% after deductible
Mail Order (90-day supply limit)				
Tier 1	\$25 copay	50% after deductible	20% after deductible	40% after deductible
Tier 2	\$88 copay	50% after deductible	20% after deductible	40% after deductible
Tier 3	\$150 copay	50% after deductible	20% after deductible	40% after deductible

* Embedded: Family coverage in the PPO plan is embedded, meaning the individual deductible and out-of-pocket maximum still applies to each individual on the plan. You can satisfy the individual limit and the plan begins covering your eligible expenses. Additionally, once a combination of family members satisfies the full family deductible and out-of-pocket maximum, the plan begins covering all family members eligible expenses.

Medical Contributions

Coverage Type	Monthly Premium			Bi-Weekly Premium		
	Annual Salary Less Than \$56,000	Annual Salary Between \$56,000-\$88,000	Annual Salary Greater Than \$88,000	Annual Salary Less Than \$56,000	Annual Salary Between \$56,000-\$88,000	Annual Salary Greater Than \$88,000
PPO						
Employee Only	\$139.40	\$205.19	\$221.08	\$69.70	\$102.59	\$110.54
Employee + Spouse	\$431.55	\$506.53	\$542.18	\$215.77	\$253.27	\$271.09
Employee + Child(ren)	\$347.55	\$416.65	\$448.68	\$173.77	\$208.32	\$224.34
Family	\$656.62	\$747.36	\$793.20	\$328.31	\$373.68	\$396.60
QHDHP						
Employee Only	\$70.34	\$115.61	\$123.17	\$35.17	\$57.80	\$61.59
Employee + Spouse	\$269.18	\$327.50	\$346.49	\$134.59	\$163.75	\$173.24
Employee + Child(ren)	\$216.74	\$269.18	\$284.54	\$108.37	\$134.59	\$142.27
Family	\$409.56	\$483.63	\$512.80	\$204.78	\$241.81	\$256.40

SPOUSAL SURCHARGE

If you have a working spouse who is eligible for medical coverage through his or her own employer, and you choose to enroll your spouse on UHSP's plan, you will pay an additional \$50/month in the 26/27 plan year. Please see the Working Spousal Surcharge form for additional information.

MDLIVE

UHSP partners with MDLIVE, Cigna's virtual visit partner, to give you access to a doctor online for non-emergency care 24/7/365, including holidays. MDLIVE is a convenient and affordable way for you to get a doctor's care through a private video visit using your smartphone, tablet, or computer. You can be at home, traveling, or even on vacation. You can also call MDLIVE at **888.726.3171** or by going to the [Cigna website](#).

Board-certified doctors can provide primary, behavioral, and dermatological care and send prescriptions to your pharmacy if needed.* Doctors can diagnose and treat a wide range of medical conditions via a virtual visit, including the following:

- Bladder infection/urinary tract infection
- Cold/flu
- Bronchitis
- Fever
- Diarrhea
- Pink eye
- Rash
- Sore throat
- And more

MDLIVE IS COVERED AT 100% FOR ALL PLANS.

* Prescription availability is defined by physician judgment and state regulations. Some state limitations may apply.

Health Savings Account (HSA)

An HSA is a tax-favored savings account which works in conjunction with your health plan coverage. If you enroll in a qualified high deductible health plan (the University’s QHDHP) and meet all eligibility requirements set by the IRS, you may contribute to a health savings account.

An HSA is similar to a checking account; you must have money in the account in order to use it. If you don’t have funds in your HSA and must pay out-of-pocket with cash or another bank account, you can reimburse yourself from the HSA at a later date when the funds are available.

HSA Major Benefits

- Funds always belong to you (even if you leave/retire)
- Funds always rollover from year to year (no “use it or lose it” provision)
- Lowers your taxable income

HSA Triple Tax Savings

- Tax deductions when you contribute to your account
- Tax-free earnings through investment
- Tax-free withdrawals for qualified medical expenses

2026 HSA Funding Limits*	
Coverage Level	Limit
Individual Coverage	\$4,400
Family Coverage	\$8,750
Age 55 or Older	Contribute an additional \$1,000 on top of these amounts

* The IRS-mandated limits include UHSP’s contributions.

UHSP Contributes to Your HSA!

UHSP will contribute money into your HSA Bank administered HSA account, called seed money, based on the tier of medical coverage you elect. Seed money contributions will count towards the IRS annual maximum contributions. UHSP requires that you contribute a minimum of \$5 per month to your HSA.

	UHSP Contributions		
	Annual Salary Less Than \$56,000	Annual Salary between \$56,000-\$88,000	Annual Salary Greater Than \$88,000
Individual Coverage	\$400	\$300	\$200
Family Coverage	\$800	\$600	\$400



ELIGIBILITY REQUIREMENTS

Because there are so many tax advantages with the HSA, there are a few eligibility requirements which you must meet in order to open and contribute to an HSA. To contribute to an HSA, you must meet the following criteria.

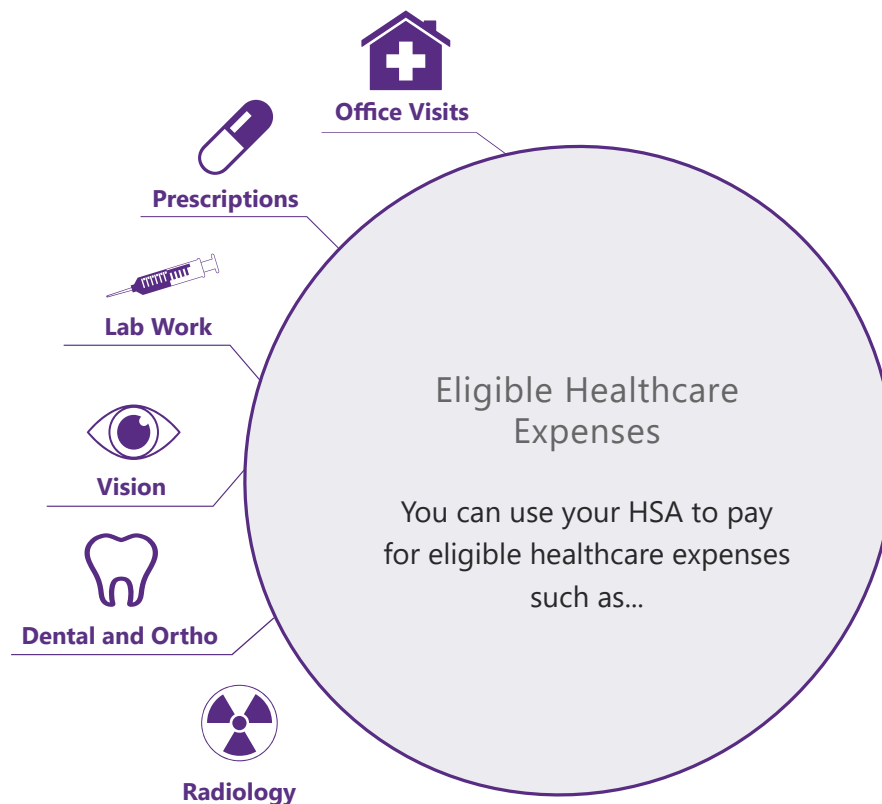
- You must be enrolled in a qualified high deductible health plan, like the University's QHDHP
- You must not be covered by any other health plan which is not a Qualified high deductible health plan
- You must not be covered by a healthcare FSA for the tax year in which you will claim your HSA deposits as tax deductions, unless it is a Limited FSA
- You must not be eligible to be claimed as a dependent on someone else's tax return
- You must not be enrolled in Medicare, TRICARE, or TRICARE for Life
- You must not have received Veterans Administration Benefits within the past three months (exception for service-related disabilities)

How to Spend Your HSA

This is a list of eligible expenses you can pay for using your HSA savings.

- Medical deductibles and coinsurance payments
- Medical, dental, and vision care services
- Medical, dental, and vision care services for your spouse or dependents, even if they are not covered under the same plan as you
- Medicare premiums and COBRA coverage
- Over the counter medications

As the HSA owner, you are responsible for determining whether a healthcare expense is eligible for reimbursement from your HSA. For a more comprehensive list of eligible and non-eligible HSA expenses, please visit [irs.gov](https://www.irs.gov) and view Section 213(d) of the IRS Tax Code.



Flexible Spending Accounts

You have the option to contribute to healthcare limited purpose and dependent care spending accounts (FSAs). Money contributed to these accounts will be deducted from your paycheck on a pre-tax basis. These accounts are administered through Navia.

Why Should I Participate?

FSAs provide you with an important tax advantage that can help you pay healthcare and dependent care expenses on a pre-tax basis. By anticipating your family's healthcare and dependent care costs for the next year, you can actually lower your taxable income.

How Does the Plan Work?

The IRS developed FSAs as a means to provide a tax break to employees. As an employee, you agree to set aside a portion of your pre-tax salary in an account, and that money is deducted from your paycheck over the course of the year. The amount you contribute to the FSA is not subject to Social Security (FICA), federal, state, or local income taxes—effectively adjusting your annual taxable salary. The taxes you pay each paycheck and collectively each year can be reduced significantly, depending on your tax bracket. And, as a result of the personal tax savings you realize, your spendable income will increase.



How Do the Healthcare and Dependent Care Accounts Differ?

HEALTHCARE REIMBURSEMENT FSA

The healthcare reimbursement FSA lets you pay for certain IRS-approved healthcare expenses not covered by your insurance plan with pre-tax dollars. For example, cash that you now spend on deductibles, copayments, or other out-of-pocket medical expenses can instead be placed in the healthcare reimbursement FSA pre-tax, to pay for these expenses. The maximum contribution to the healthcare reimbursement FSA is \$3,400 per plan year.

LIMITED PURPOSE FSA

HSA participants can elect to open a limited purpose FSA. Eligible expenses include eligible dental and vision expenses. The maximum contribution to the limited purpose FSA is \$3,400.

DEPENDENT CARE FSA

The dependent care FSA lets you use pre-tax dollars towards qualified dependent care. The maximum amount you may contribute to the dependent care FSA is \$7,500 (or \$3,750 if married and filing separately) per plan year.

EXAMPLES OF FSA ELIGIBLE EXPENSES

Healthcare Spending Account

- Medical, dental, and vision copays
- Prescription drug copays
- Medical and dental deductibles
- Hearing aids
- Eyeglasses
- Contacts
- Contact lens solution
- Dental services
- Orthodontia
- Over-the-counter medical supplies

Dependent Care Spending Account

- Cost of child or adult daycare*
- Nursery school
- Preschool (excluding kindergarten)

* Eligible dependent: tax dependent child under age 13; or tax dependent spouse, parent, or child unable to care for themselves.

Carryover Provision

It is important to carefully consider the appropriate contributions to your FSAs each year, as funds do not roll over from year to year. However, the University's healthcare reimbursement FSA and limited purpose FSA include a carryover provision. This means that any unused funds (now up to \$680) may be carried over into the next plan year. Any amount over \$680 will be forfeited. These funds must be used within 90 days of the following plan year.

Flexible Spending Accounts Comparison

Healthcare FSA	Limited Purpose FSA	Dependent Care FSA
Am I Eligible to Participate?		
You are not eligible to participate in the healthcare FSA program if you have a health savings account (HSA) or a limited purpose FSA	You are not eligible to participate in the limited purpose FSA program if you have a healthcare FSA	You can participate in the dependent care FSA program regardless of any other benefit elections
Eligible Expenses*		
- Medical expenses—doctor visits, lab work, prescription, and over-the-counter medications - Dental expenses—dentist office visits, X-rays, dentures, orthodontia, etc. - Vision expenses—eyeglasses, contacts, contact lens solution, laser eye surgery, etc.	- Dental expenses—dentist office visits, X-rays, dentures, orthodontia, etc. - Vision expenses—eyeglasses, contacts, contact lens solution, laser eye surgery, etc.	- Daycare expenses, after-school programs, and day camp programs for dependents up to the age of 13 - Expenses for the care of a disabled spouse or disabled dependents of any age
2026 Contribution Limit		
\$3,400	\$3,400	\$7,500 per household (or \$3,750 if married and filing separately)
When are Funds Available?		
Your full 2026 contribution amount is available to spend on July 1		Your funds become available as you contribute each pay period
Deadline to Submit Claims		
You have 90 days to submit claims for expenses incurred in the prior plan year <i>(Claims for expenses incurred from July 1, 2026-June 30, 2027 must be submitted by September 28, 2027)</i>		
Use it or Lose it Rule		
You can rollover to \$680 annually	You can rollover up to \$680 annually	No rollover provision



What is the Difference Between an HSA and FSA?

	Health Savings Account	Healthcare FSA
How Much Can I Contribute Pre-Tax to My Savings Account?	Up to \$4,400 for individual coverage and \$8,750 for any other coverage level; if you are 55+, the IRS allows you to contribute an additional \$1,000 catch-up contribution	Up to \$3,400, regardless of dependents being covered on the medical plan
What Can I Use My Pre-Tax Savings For?	Offset your medical deductible (for amounts not eligible for reimbursement through HRA), copays (if applicable to your plan), coinsurance, prescription drug costs, dental care, vision care, and much more	
Where Can I Find a Comprehensive List of Eligible Expenses?	www.irs.gov ; Section 213 (d) of the IRS Tax Code	
Can I Make Changes to My Contribution Mid-Year?	Yes; you may make contribution changes throughout the plan year	Upon experiencing a qualifying life event only
When Are My Savings Available to Me?	HSA funds are available shortly after your payroll deduction occurs; only funds that have been payroll deducted and deposited to your account are available; this includes UHSP contributions	Healthcare FSAs are fully funded and available for you to use as of July 1 or the date you become eligible to participate
What Happens to Funds Unused at the End of the Year?	HSA funds always roll over from year to year	The healthcare FSA is a “use it or lose it” benefit; however, UHSP allows you to rollover up to \$680 to be used on qualified medical expenses in the next year; funds over \$680 are forfeited



Dental Insurance

UHSP partners with Cigna to offer you dental coverage. Below is a high-level description of the plan. More detailed benefit summaries are available through Human Resources.

Dental—Cigna		
	In-Network	Out-of-Network
Calendar Year Deductible*		
Individual	\$50	\$50
Family	\$150	\$150
Calendar Year Maximum		
	\$1,500 per person	
Coinsurance		
Preventive	100%	80%
Basic	80%	60%
Major	50%	40%
Orthodontia	50%	50%

* Deductibles do not apply to preventive services.

Dental Contributions

Coverage Type	Monthly Premium	Bi-Weekly Premium
Employee Only	\$16.06	\$8.03
Employee + Spouse	\$31.80	\$15.90
Employee + Child(ren)	\$36.03	\$18.02
Family	\$51.03	\$25.52

FIND AN IN-NETWORK PROVIDER

Remember to visit in-network dentists to receive the deepest level of discount on your services.

To find a participating in-network dentist in your area, go to www.cigna.com and click on "Find a Doctor, Dentist, or Facility."



Vision Insurance

Vision insurance is administered by EyeMed. See the chart below for a high-level description of the plan.

	Monthly Vision Contributions	
	In-Network	Out-of-Network
Eye Exam	\$10 copay (\$0 copay at PLUS Providers)	Up to \$40 reimbursement
Lenses		
Single Vision	\$25 copay	Up to \$30 reimbursement
Bifocal	\$25 copay	Up to \$50 reimbursement
Trifocal	\$25 copay	Up to \$70 reimbursement
Frames		
	\$130 allowance; 20% off balance over allowance (\$180 allowance at PLUS Providers)	Up to \$91 reimbursement
Contact Lenses (in lieu of glasses)		
Conventional	\$0 copay; 15% off balance over \$130 allowance	Up to \$91 reimbursement
Disposable	\$0 copay; 100% of balance over \$130 allowance	Up to \$91 reimbursement
Medically Necessary	\$0 copay; paid-in-full	Up to \$210 reimbursement
Frequency		
Exams	12 months	
Lenses	12 months	
Contacts	12 months	
Frames	24 months	

Vision Contributions

Coverage Type	Monthly Premium	Bi-Weekly Premium
Employee Only	\$5.96	\$2.98
Employee + Spouse	\$11.32	\$5.66
Employee + Child(ren)	\$11.92	\$5.96
Family	\$17.52	\$8.76

Business Travel Accident (BTA) Insurance

The University provides you with BTA. This \$300,000 benefit covers you while you travel on business. Spouses are also covered for \$25,000 and children for \$10,000 if traveling with you on business. Details are available through Human Resources.

Business Travel Medical (BTM) Insurance

The University provides you with BTM. This \$500,000 benefit covers medical expenses while you travel on business. Spouses are also covered for \$100,000 and children for \$25,000 if traveling with you on business. Details are available through Human Resources.

Employee Assistance Program (EAP)

You have access to an EAP through H&H. Employees can seek up to three complimentary visits for personal counseling services and unlimited telephonic consultation. All items discussed with the EAP are confidential and are not reported to the University. For additional information or to speak to a counselor, please call **800.832.8302** or **314.845.8302**.

Basic Term Life and Accidental Death and Dismemberment (AD&D) Insurance

The University provides you with term life and AD&D insurance equal to 1× annual earnings to \$300,000. This coverage, now through Lincoln Financial, is at no cost to you.

Beneficiaries can be updated at anytime in Paycom.

Voluntary Short Term Disability (STD) Insurance

You may enroll in voluntary STD coverage through Lincoln Financial. Payments under the policy will begin on the eighth day of an accident or illness and may continue for up to 12 weeks. The benefit pays 60% of covered weekly earnings to a maximum of \$1,000 per week.

There is a pre-existing condition limitation. If you receive treatment for a condition within the 6 months prior to your effective date, you will need to wait 12 months before the plan will pay benefits for the same condition.

Long Term Disability (LTD) Insurance

The University provides you with long term disability through Lincoln Financial.

If you are disabled for more than 90 days, you may be eligible for LTD payments. The LTD income replacement is 60% up to a maximum of \$10,000. Payments will continue as long as you remain disabled to the later of your Social Security Normal Retirement Age or the maximum benefit payment period included in the policy.

Voluntary Term Life Insurance

The University offers you voluntary term life insurance through Lincoln Financial. You have the opportunity to purchase additional term life insurance for yourself equal to 1 to 5× annual salary to a maximum of \$500,000.

If you are outside of your new hire period or wish to increase your coverage, you will be required to complete evidence of insurability (EOI).

If you elect voluntary coverage for yourself, you can also elect voluntary life for your dependents (you cannot elect voluntary coverage for your spouse/dependents unless you elect your own voluntary employee life coverage). Coverage for your spouse and children are available in one of two options.

Voluntary Life Insurance Coverage	
Option A	Spouse: \$10,000; Child(ren): \$5,000
Option B	Spouse: \$20,000; Child(ren): \$10,000

Voluntary AD&D Insurance

You have the opportunity to purchase additional AD&D insurance via payroll deductions. You must enroll in Voluntary Life coverage to also enroll in Voluntary AD&D coverage.

Voluntary AD&D Insurance Coverage	
Employee	1 to 5× salary to \$500,000
Employee + Spouse	50% of the employee election
Employee + Spouse and Child(ren)	Spouse: 40% of employee election Children: 10% of employee election
Employee + Child(ren)	15% of the employee election



Voluntary Benefits

UHSP partners with Cigna to offer voluntary Accident, Critical Illness, and Hospital Indemnity plan options. These plans create an added layer of financial protection for you and your family by making cash payments directly to you.

Accident Insurance

Accidents can happen when you least expect them. This plan is designed to pay a tax-free cash benefit directly to you when an injury occurs off the job. Some examples are:

- Emergency care
- Ambulance
- Hospital admission
- Burns
- Hospital confinement

Cost of Coverage

	Monthly	Bi-Weekly
Employee	\$12.25	\$6.13
Employee + Spouse	\$20.98	\$10.49
Employee + Children	\$27.55	\$13.78
Family	\$35.76	\$17.88

Hospital Indemnity

Hospital Indemnity insurance provides direct payment if you are hospitalized. It includes separate amounts for events such as:

- Hospital admission
- Hospital confinement
- Hospital intensive care

Cost of Coverage

	Monthly	Bi-Weekly
Employee	\$17.51	\$8.76
Employee + Spouse	\$43.16	\$21.58
Employee + Children	\$27.58	\$13.79
Family	\$53.22	\$26.61

Critical Illness Insurance

There can be a lot of expenses associated with a critical illness, and a major medical plan may not cover them all. Critical Illness insurance provides you a lump-sum payment so you can focus on what matters most—getting better. You can purchase coverage in \$10,000 increments, up to \$30,000. Spouse and child coverage is available at 100% of employee elected amount.

Covered critical illnesses include:

- Cancer
- Alzheimer's disease
- Heart attack
- Major organ failure
- Stroke

Your per paycheck cost of coverage depends on the coverage amount you elect. Specific rates are listed in Paycom.

HEALTH SCREENING BENEFIT

Each person covered under the Accident or Critical Illness plans is eligible to receive a \$50 benefit per calendar year for taking an eligible health screening.

FILING A CLAIM

To file a claim under one of the voluntary benefits plans:

- Visit [MyCigna.com](https://mycigna.com)
- Under the coverage tab at the top of the screen, select "Supplemental Health"
- At the bottom of the page, click "Submit a Claim"
- Complete the online claim form

Tuition Remission

- Tuition remission and tuition exchange for dependent children. Tuition remission and tuition exchange for dependent children. With five years of service, qualifying dependent children can enroll tuition free at UHSP. At three years of service, dependent children can apply through one or more tuition exchange networks for full tuition scholarships at hundreds of schools for the 2026-2027 academic year. While awards are competitive, dependents typically get at least one award. Tuition remission and tuition exchange are subject to qualification of employee eligibility, dependent status, acceptance at importing institutions, and deadlines.
- Tuition Reimbursement for eligible employees with at least six months of service based upon program guidelines, such as pursuit of a job-related degree and program funds. Benefits are taxable as per IRS guidelines.
- Student loan forgiveness benefit program. To help employees and eligible dependents benefit from UHSP's eligibility as a non-profit employer where employee service qualifies for the federal public service loan forgiveness (PSLF) program, UHSP has partnered with TIAA to join forces with Savi, a concierge service that will help employees select the optimal federal student loan repayment plan and apply for public service loan forgiveness (PSLF). On average, participants reduce their monthly payment and greatly improve acceptance for forgiveness.

Sick Leave

Full-time faculty and staff accrue one day of possible sick leave for each month of employment at the University (nine days per year for academic faculty, 12 days per year for those with 12-month appointments). These days will continue to accrue up to a maximum of three months (66 working days).

To respect each employee's own commitment to family responsibilities, up to a maximum of **six** accrued sick days per calendar year may be used for the care of an immediate family member who is ill. Immediate family member is defined as a **child, step-child, spouse, domestic partner, sibling, parent, mother-in-law, father-in-law, grandchild, grandparent, or stepparent**. Time used for this purpose is deducted from the employee's sick leave bank. Care for family may also qualify as FMLA or caregiver/parental leave. Questions regarding chargeable sick time and accrued sick time may be directed to Human Resources.

403(b) Retirement

The University offers a generous retirement savings benefit to provide a measure of income security for employees after retirement. TIAA helps manage the University's 403(b) plan.

Employees are eligible to defer their salary into a diversified menu of funds the first day of the month after employment. Employees who meet eligibility requirements (one year of service with 1,000 hours worked) receive an employer match of twice their contribution. The current retirement match is 5%. If the match changes in the future, you will be notified.

Vacation

The amount of vacation, paid by the University, to which you are eligible, depends on your position with the University. The University encourages employees to use their vacation in order to rest from the pressures of work and to have extended time with families. Please see Human Resources for more information.

Holidays

- New Year's Day
- Martin Luther King Jr. Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Thanksgiving (Wed. through Fri.)*
- Christmas Eve through New Year's Day*
- Five floating holidays (pro-rated based on start date)

* Employees in the research labs follow a different holiday schedule.

Caregiver/Parental Leave

The University of Health Sciences and Pharmacy in St. Louis recognizes that employees must balance work obligations with providing care for their families. Caregiver/Parental Leave is a new leave benefit that will provide up to four weeks of paid leave in a rolling 12-month period at 100% of base pay for full-time employees who have been employed with UHSP for at least one year and qualify for FMLA for reasons such as: the birth of a child, care of spouse/child/parent with a serious health condition, care for spouse/child/parent who is a member of armed services undergoing treatment, recuperation or therapy, or a qualifying exigency.



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