DePaul University is committed to providing a comprehensive employee benefits package that attracts and retains talent to further the university's mission and contributes to the personal and financial well-being of employees and their families.

Our employee benefits can assist you at many life stages through:

- Health and Welfare Programs that support wellness and security,
- Financial Programs that help you save for a more secure future, and
- Work / Life Benefits that support the balance between your work and personal life.

This document, the *Benefits Overview and Enrollment Guide*, provides information to help you understand the plan options available, identifies additional resources available to you for decision making, and provides enrollment instructions. The Overview provides the following information:

- Highlights of benefit plans for the 2020 plan year,
- Information for newly hired employees enrolling for the first time,
- Information for employees who are making enrollment decisions,
- Consequences of not reviewing and initiating elections upon hire or during the annual benefits open enrollment period,
- Eligibility and coverage information for each of the university's benefit plans, and
- Enrollment instructions.

The Overview is provided for convenience to faculty and staff and does not supersede the Summary Plan Descriptions (SPDs), policies or other official plan documents that can be found by visiting the Human Resources website at [https://go.depaul.edu/benefits](https://go.depaul.edu/benefits).
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# Benefits Enrollment Chart

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<th></th>
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<td>New Employee Enrollment</td>
<td>Automatic Enrollment²</td>
<td>Annual Benefits Open Enrollment</td>
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<td><strong>Medical/Dental/Vision Plans</strong></td>
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<tr>
<td>Consumer Driven Health Plan (CDHP)</td>
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<tr>
<td>Health Savings Account (HSA)</td>
<td></td>
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<tr>
<td>PPO</td>
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<td>X</td>
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<tr>
<td>HMO Illinois</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Dental Plan</td>
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<tr>
<td>Vision Plan</td>
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<td><strong>Flexible Spending Accounts</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Health Care FSA</td>
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<td>X</td>
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<tr>
<td>Dependent Care FSA</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>Life Insurance and Disability Plans</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Basic Life</td>
<td></td>
<td>X²</td>
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<tr>
<td>Short-term Disability</td>
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<td>X²</td>
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<tr>
<td>Long-term Disability</td>
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<td>Supplemental Life</td>
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<td></td>
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<tr>
<td>Accidental Death &amp; Dismemberment</td>
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<td>X</td>
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<td>Dependent Life</td>
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<td>X</td>
<td></td>
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<tr>
<td><strong>403 (b) Retirement Plan</strong></td>
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<td>Employee Contribution</td>
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<td>X²</td>
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<tr>
<td>Depaul Contribution</td>
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<td><strong>Education Assistance</strong></td>
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<tr>
<td>Tuition Waiver</td>
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<td>X⁴</td>
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<tr>
<td>Tuition Exchange</td>
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<td>X⁵</td>
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<tr>
<td><strong>Tax Savings Plans</strong></td>
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<tr>
<td>Mass Transit Program</td>
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<tr>
<td>Parking Program</td>
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<tr>
<td><strong>Paid Time Off Plans</strong></td>
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<tr>
<td>Holidays</td>
<td></td>
<td></td>
<td>X²</td>
</tr>
<tr>
<td>Vacation</td>
<td></td>
<td></td>
<td>X²</td>
</tr>
<tr>
<td><strong>Work-Life Benefits and Programs</strong></td>
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<tr>
<td>Adoption Assistance</td>
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<td></td>
<td></td>
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<tr>
<td>Employee Assistance Program</td>
<td></td>
<td></td>
<td>X²</td>
</tr>
<tr>
<td>Bright Horizons Care Advantage</td>
<td></td>
<td></td>
<td>X²</td>
</tr>
<tr>
<td>Family and Medical Leave</td>
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<td></td>
<td>X²</td>
</tr>
<tr>
<td>Flexible Work Arrangements</td>
<td></td>
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</tr>
<tr>
<td><strong>Voluntary Benefits</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Auto/Home/Renters Insurance</td>
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</tr>
</tbody>
</table>

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**Footnotes:**

1. Participation in some of the plans may result in additional taxable income under certain situations. For more information, refer to the Summary Plan Description.
2. Provided applicable plan and program eligibility requirements are met.
3. Note that in order to make pre-tax contributions to your Health Savings Account and to receive the employer contribution, you must enroll in the CDHP and set up an HSA account.
4. Aspects of the dependent tuition waiver policy require certain certifications. Refer to the Tuition Waiver Policy for additional details.
5. The application process for the Tuition Exchange program occurs each fall separate from the benefits open enrollment.
Instructions for Using the Self-Service Benefits Enrollment Application

If you experience any problems using the enrollment application, call the Benefits Department at (312) 362-8232.

A. Navigate to the Benefits Enrollment Application on myHR:  [https://myhr.depaul.edu](https://myhr.depaul.edu)
1. Log on to myHR by entering your user ID and password
2. Click on the “Self Service” menu item
3. Click on the “Benefits Enrollment” icon/link under Benefits
4. This will take you to the BENEFITS ENROLLMENT – OPEN BENEFITS EVENTS page.

B. Complete the Benefits Enrollment Application:
1. Click on the “Select” button. This will take you to the BENEFITS ENROLLMENT page.
2. The Enrollment Summary displays all available plans in which you can enroll as well as shows all of your current elections.
3. If you want to change your benefit elections (or elect a benefit for the first time as a new employee), click on the “Edit” button next to the plan to enroll or make a change. This will take you to the SELECTION PAGE that displays all available plan options and the cost associated with each option.
4. To make an election, click on the option you want.
5. At the bottom of the SELECTION page, for plans allowing dependent coverage, a list of dependents for whom you have submitted a Dependent Add/Change form is displayed. To enroll any of the individuals in the plan, click on the “Enroll” box for each applicable individual.
6. Click on the “Update and Continue” icon to save your elections.
7. Click “Update Elections” to store your choices, confirm your election and return you back to the BENEFITS ENROLLMENT page.
8. For each plan where you want to make an election decision, click “EDIT” and repeat steps 3 – 7.

C. Finalize Your Benefits Enrollment:
1. Once you have completed making all of your election choices, click the “Save and Continue” icon to finish your enrollment.
2. This will take you to the BENEFITS ENROLLMENT – SUBMIT BENEFITS CHOICES page. To submit your final enrollment choices, click on the “Submit” icon. If you want to make additional changes, click on the “Cancel” icon.
3. If you clicked on the “Submit” icon, you will be taken to the BENEFITS ENROLLMENT – SUBMIT CONFIRMATION page.
4. This completes your enrollment. Click “OK” and you will be returned to the BENEFITS ENROLLMENT page.

D: Confirm Your Benefits Enrollment
To view and print a Benefit Summary, follow the steps below.
⇒ New hires: do 24 hours after you elect your benefits.
⇒ Current employees: do during the fourth week of November, after annual benefits open enrollment has ended.

1. Log on to myHR by entering your user ID and password
2. Click on the “Self Service” menu item
3. Click on the “Benefits Summary” icon/link under Benefits
4. Change the date to the first of the month that your coverage begins (January 1st of the next calendar year, if checking for annual benefits open enrollment elections).
5. After entering the appropriate date, click on the “Go” icon. A complete summary of your benefits will display, not just those requiring election.
6. Verify the accuracy of the plan elections, the eligible individuals covered, and the premiums.
7. Print a copy of the page for your records. Contact the Benefits Department if there are any concerns or errors.

Your benefit elections are effective as follows:
- New faculty (not starting on September 1) and staff: the first of the month following, or coinciding with, your employment start date.
- New faculty with contracts beginning on September 1st: September 1.
- Annual Benefits Open Enrollment: January 1st.
Who Can Be Covered?

You may cover yourself and your eligible dependents in the plans as follows:

<table>
<thead>
<tr>
<th>Eligible Classifications</th>
<th>Medical Plans</th>
<th>Dental Plan</th>
<th>Vision Plan</th>
<th>Supplemental Life/AD&amp;D</th>
<th>Dependent Optional Life</th>
<th>Basic Life/LTD / STD**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spouse*</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Children</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second Domiciled Adults (SDAs) – One only*</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children of SDAs</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

*You may cover a spouse or SDA, but not both
**Automatic enrollment.

Spouses of Eligible Employees: A spouse is a person to whom you are considered married for federal income tax purposes. An eligible spouse may include an individual described in this section from whom you are separated under a legal separation decree, but not a divorce.

Children of Eligible Employees: To be eligible for medical coverage as a child dependent of a covered employee under the DePaul University Health Plans, the child must meet the following criteria:

- be the natural born, adopted or placed for adoption (meaning placed permanently with the employee for adoption) child, stepchild, or a child for whom the employee is the court-appointed legal guardian
- under age 26, or under age 30 if a military veteran

To be eligible for dental and vision coverage as a child dependent of a covered employee under the DePaul University Health Plans, the child must be under age 26 and meet BOTH the General Requirements and the Criteria for Tax-favored Health Benefits under the Internal Revenue Code.

The requirements for eligibility for medical, dental and vision coverage are delineated in the Summary Plan Description available on the HR website. It is the employee’s responsibility to ensure only eligible dependents are enrolled in the DePaul benefit plan.

Second Domiciled Adults (SDAs) / Children of SDAs: DePaul University extends certain benefits to Second Domiciled Adults (SDA) of active employees in lieu of a spouse. SDAs can be either related or unrelated. The criteria for SDA eligibility are delineated in the Summary Plan Description available on the HR website. It is the employee’s responsibility to ensure only eligible individuals are enrolled in the plan.

Note also that under Federal law, enrolling an unrelated SDA or child of an SDA who do not meet the criteria for tax-favored health benefits under the Internal Revenue Code will result in imputed income to the employee. The taxation rules for SDAs are delineated in the Summary Plan Description available on the HR website. It is the employee’s responsibility to ensure the proper tax status of an enrolled SDA is accurately reported to the university.
Health Benefits

DePaul recognizes that preventive care and wellness education is the key to healthy employees and families. DePaul also recognizes that each employee has unique health care needs and a choice in their medical plan decision. All faculty and staff are encouraged to review their benefit elections during the annual benefits open enrollment period and actively confirm their dependents and elected coverage.

Life events can also change the needs of individuals and families. Employees should consider how both current and expected changes will impact their benefit choices and plan ahead when considering benefit choices during the enrollment period. The following charts provide more details.

What Happens if You Do Not Enroll in the Benefit Plans?

<table>
<thead>
<tr>
<th>Benefit Plan</th>
<th>New Employee</th>
<th>Current Employee</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you do not take action:</td>
<td>Within 31 days of your employment start date</td>
<td>During annual benefits open enrollment</td>
</tr>
<tr>
<td>Medical Plans</td>
<td>You are automatically enrolled in the Blue Cross Blue Shield CDHP Plan with employee only coverage.*</td>
<td>Plan participants in the CDHP, PPO and HMO Illinois plans will have their elections carried forward.</td>
</tr>
<tr>
<td>Dental Plan</td>
<td>You will not be enrolled in the dental plan.*</td>
<td>Plan participants will have their elections carried forward.</td>
</tr>
<tr>
<td>Vision Plan</td>
<td>You will not be enrolled in the vision plan.*</td>
<td>Plan participants will have their elections carried forward.</td>
</tr>
<tr>
<td>Health Savings Account (HSA) (applicable only if electing the CDHP)</td>
<td>You will not have employee contributions made to your HSA.</td>
<td>Your contribution election will carry forward</td>
</tr>
<tr>
<td>Health Care Flexible Spending Account (FSA)</td>
<td>You will not be enrolled in the Health Care FSA.*</td>
<td>You will not be enrolled in the Health Care FSA* for the next year.</td>
</tr>
<tr>
<td>Dependent Care Flexible Spending Account (FSA)</td>
<td>You will not be enrolled in the Dependent Care FSA.*</td>
<td>You will not be enrolled in the Dependent Care FSA* for the next year.</td>
</tr>
</tbody>
</table>

* You will not be able to elect coverage until the next annual benefits open enrollment period unless you have a qualifying family status change.

Qualified Family Status Changes
Carefully consider the benefit elections you make during this enrollment period because you are not allowed to change elections during the plan year (calendar year), unless you have a “qualified family status change”. Examples of qualified status changes include: Marriage, Divorce or Legal Separation, Death of a Dependent, Birth of a Child, Spouse gains or loses other coverage, Adoption of a child, Loss of dependent eligibility due to attaining age 26 (age 30 if a military veteran). For more information regarding these limitations and qualified family status changes, refer to the Summary Plan Descriptions on the HR website.

Pre-tax Features
As defined by the cafeteria plan rules in Section 125 of the Internal Revenue Code, you automatically pay for your health, dental and vision benefits with pre-tax dollars, in effect, lowering the amount of your taxable income.

Note: Paying less in Social Security taxes may have an impact on your future Social Security benefits. Your eligibility to receive a benefit from Social Security is not affected, but the actual monthly benefit amount you receive may be slightly less.

Medical Plan Options
DePaul offers 3 medical plan options:
- Blue Cross Blue Shield Consumer Driven Health Plan (CDHP)
- Blue Cross Blue Shield Preferred Provider Organization (PPO)
- HMO Illinois
1. **Blue Cross Blue Shield Consumer Driven Health Plan (CDHP)**

CDHP Plan Highlight Sheet

The CDHP combines a medical coverage with a health savings account (HSA) to help you and your family invest in your well-being. The CDHP features include a network of hospitals and physicians that have agreed to accept a scheduled, discounted rate for their services. Participants may choose to visit any health care provider included in the network without a referral, and charges will be paid up to 80% of the scheduled amount after satisfying the annual deductible. When using providers who are not in the network, charges are paid up to 60% after the annual out-of-network deductible is satisfied. Out-of-network services are subject to reimbursement restrictions. Once you enroll in the CDHP and open an HSA, you and DePaul can make tax-free contributions. Certain restrictions apply to a CDHP and HSA. Refer to the [HSA website](http://www.treasury.gov/resource-center/faqs/Taxes/Pages/Health-Savings-Accounts.aspx) for additional information. To determine if you are eligible to contribute to an HSA you are advised to talk to your tax advisor.

<table>
<thead>
<tr>
<th>Type of Coverage</th>
<th>DePaul HSA Contribution</th>
<th>2020 Maximum Annual Account Contribution</th>
<th>2020 Maximum Employee Contribution Allowed**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Coverage</td>
<td>$ 500</td>
<td>$ 3,550</td>
<td>$3,050 ($3,550 - $500)</td>
</tr>
<tr>
<td>Employee-Plus-Child(ren), Employee-Plus-Spouse, or Family Coverage</td>
<td>$ 1,000</td>
<td>$ 7,100</td>
<td>$6,100 ($7,100 - $1,000)</td>
</tr>
</tbody>
</table>

*Contributions are proportionally less when enrollment in the CDHP occurs after January 1
** Employees age 55+ are eligible to make an additional $1,000 catch-up contribution.

More on the Health Savings Account Opportunity

Those who enroll in the CDHP must also open a Health Savings Account (HSA) in order to receive the DePaul contribution. The HSA is a tax-exempt, funded account. Eligible individuals and/or their employers may make tax-free contributions within specified annual limits. Earnings (interest, dividends, investments) in the account grow on a tax-free basis. Distributions or withdrawals are tax-free, if used for qualified medical expenses (medical, dental, and vision expenses as well as future health care premiums, such as those required for COBRA, some retiree medical plans or Long Term Care insurance premiums).

- DePaul University’s contributions to the employee’s HSA are not taxable and only become taxable if the employee later uses the funds for non-qualified medical expenses.
- Employee contributions to an HSA reduce taxable income in the year of the contribution and the employee is taxed only if the contribution is used for non-qualified medical expenses.
- HSA account balances accumulate year-to-year tax-free, and without risk of forfeiture.
- HSA accounts are portable upon leaving DePaul.

Remember, you must be enrolled in the CDHP in order to make contributions to a HSA. Employee contributions to the HSA are not required. You will receive the employer contribution to the HSA as long as the HSA account is established with Benefit Wallet (Mellon Bank).

As the owner of an HSA, you must ensure that all contributions and distributions fall within the IRS limits. You are responsible for any IRS taxes and penalties and are strongly encouraged to talk to a tax advisor regarding your contributions. More information is available on the Department of Treasury website [http://www.treasury.gov/resource-center/faqs/Taxes/Pages/Health-Savings-Accounts.aspx](http://www.treasury.gov/resource-center/faqs/Taxes/Pages/Health-Savings-Accounts.aspx).

2. **Blue Cross Blue Shield Preferred Provider Organization (PPO)**

PPO Plan Highlight Sheet

The PPO plan features a network of hospitals and physicians that have agreed to scheduled, discounted rates for their services. Participants may choose to visit any health care provider included in the PPO network without a referral. Charges will be paid at 80% of the scheduled amount after satisfying the annual deductible. Office visits are subject to a $30 (primary care physician), $50 (specialist), or $25 (MD Live virtual visit) co-pay. When using providers who are not in the network, charges are paid at 60% after the annual out-of-network deductible is satisfied. Out-of-network services are subject to reimbursement restrictions.

3. **HMO Illinois**

HMO Illinois Plan Highlight Sheet

The HMO plan features low out-of-pocket costs for most services - office visit co-pays are set at $30 (primary care physician) or $50 (specialist). Most other services are covered at 100%. Participants must use the doctors, hospitals and other health care providers within
the HMO network. There are no benefits paid for services by providers who are not in the HMO’s network. All services received must be coordinated by a primary care physician.

Summary Plan Descriptions which provide plan details are available at the Human Resources website at go.depaul.edu/benefits.

Dental Plan
Dental Plan Highlight Sheet

The Dental plan, administered by Blue Cross Blue Shield, provides comprehensive dental coverage. The maximum amount that the plan will pay each year is $1,500 (not including orthodontia expenses) per covered person after a $50 deductible. There is no deductible for preventive dental services or orthodontia. Orthodontia (for dependent children under the age of 19) has a separate lifetime maximum of $1,500 per covered person. In-network plan benefits are:

- Preventive Services: 100%*
- Primary Services: 80%*
- Major Services: 50%*
- Orthodontics: 50%*

*Out-of-network services are reimbursed at the same percentage but are typically significantly more expensive. Also, out-of-network services are subject to reimbursement restrictions.

Vision Plan

The Vision plan, administered by VSP, provides a vision examination and either eyeglasses or contact lenses (but not both) once every 12 months. The plan is paid entirely by the employee.

Examinations are paid in full by network providers after a $10 co-payment. Eyeglasses can be purchased annually under the plan for as low as a $20 co-payment. There is also an annual allowance of $150 toward the cost of contact lenses. There may be additional out-of-pocket expense for lens coatings and cosmetic items such as designer frames, oversized lenses, tinted lenses, and lenses and frames that exceed the plan maximums.

When services are received from an out-of-network provider, the employee pays the full cost to the provider and then receives reimbursement from the insurer according to a limited schedule of allowances.
Health Benefits

Health Plans Enrollment Steps

Step 1: Select Plans in which to Enroll

A. Review the health plan options and premiums (see the Health Benefits page on the HR website)
B. For more detailed plan information, review the Summary Plan Descriptions

Step 2: Submit Form to Add/Remove Dependents

A. New Employees
   • If you want to cover a spouse and/or dependent child(ren), add the individual(s) using the Dependent Add/Change form. Submit the completed form to the Benefits Department. The Benefits Department will then add these individuals to the system so that you can elect coverage for them when using the on-line enrollment application.
   • You will not be able to enroll these additional individuals in any benefit plan until the Benefits Department has added their records to the HR System.

B. Current Employees During Annual Benefits Open Enrollment
   • If you want to cover a spouse and/or dependent child(ren), add the individual(s) by using the Dependent Add/Change form. Submit the completed form to the Benefits Department. The Benefits Department will then update these individuals in the system so that you can elect the appropriate coverage for them when using the on-line enrollment application.
   • You will not be able to add additional individuals in any benefit plan until the Benefits Department has added their records to the HR System.

Step 3: If Applicable, Enroll SDA / SDA Children

A. Before you enroll an SDA:
   Complete a Second Domiciled Adult Affidavit of Eligibility form and Declaration of Tax Status form and submit to the Benefits Department. The Benefits Department will then add these individuals to the system so that you can elect coverage for them when using the on-line enrollment application.

B. When can SDA coverage be elected?
   Coverage must be elected during the new employee 31 day enrollment period or during the annual benefits open enrollment period. If not elected at this time, then coverage can only be elected within 31 days of one of the following events:
   • The employee and SDA first become eligible (i.e., first meet all the eligibility criteria);
   • The Second Domiciled Adult loses other group coverage and is eligible for DePaul coverage; or
   • The employee meets the 6 month waiting period for enrolling a new Unrelated SDA after having previously dropped coverage for an Unrelated SDA due to death or termination of the relationship.

Step 4: Enroll in the Chosen Benefits Plans

See the Instructions for Using the Self-Service Enrollment Application.

A. Risk of Additional Taxation
   Under federal law, enrolling a child dependent, an unrelated SDA or children of an SDA who do not meet the criteria for tax-favored health benefits under the Internal Revenue Code will result in imputed (taxable) income to the employee. In addition, employee premium contributions made on their behalf must be paid on an after-tax basis. The taxation rules for SDAs are explained in the Summary Plan Description that can be found on the Human Resources website.

DePaul will comply with the federal tax rules as follows:
   • Coverage for a non-tax favored child dependent will automatically be on a taxable basis unless the employee returns a completed Declaration of Tax Status Form to HR;
   • Coverage for a related SDA will automatically be on a tax-favored basis. Employees may make pre-tax contributions for the coverage of the related SDA and will not have imputed income;
   • Coverage for an Unrelated SDA and children of all SDAs will automatically be on a taxable basis unless the employee returns a completed Declaration of Tax Status form to HR; and
   • Tax status changes will be made on a prospective basis only.
For non-tax favored child dependents, SDAs and children who are not eligible for tax-favored health coverage, DePaul will:

- Establish the fair market value of the health coverage;
- Include this amount (less any after-tax employee contributions) in the employee’s income when determining income and payroll taxes;
- Report the imputed income on the employee’s W-2; and
- Deduct employee premium contributions for the non-tax favored child dependent, unrelated SDA and/or SDA’s children on an after-tax basis.

B. What is Imputed Income?

For this benefit, imputed income is the value of coverage applicable to the portion of the medical plan premium paid by DePaul for coverage associated with your SDA, child of SDA or non-tax favored child dependent. Imputed income is reported on your annual Form W-2 based on IRS requirements.

Imputed income only applies to those dependents not eligible for tax favored health benefits under the Internal Revenue Code. The amount of imputed income represents the University’s portion of the premium for coverage of the non-tax favored dependent and varies with the medical plan coverage option you choose. Your portion of the bi-weekly premium will be deducted on a pre-tax basis, but the portion of the bi-weekly premium attributed to your covered dependents who do not meet the Internal Revenue Code’s criteria for tax-favored status will be deducted on an after-tax basis.

Step 5: Confirm Your Enrollment Selections

See the Instructions for Using the Self-Service Enrollment Application.

Step 6: HMO Illinois Participants: Select a Medical Group if Enrolling in HMO Illinois for the First Time

When you enroll in HMO Illinois, you will need to choose a medical group. HMO Illinois will need this information before you receive a medical ID card. You have 2 options:

A. You can wait for HMO Illinois to send you a letter requesting this information and giving you information on how to find a medical group provider and a number to call at HMO Illinois once you make your selection, or

B. You can look up the medical group on the Provider Finder site for Blue Cross Blue Shield (provider information can be accessed from the HR website) or you can call HMO Illinois with the information. For current employees during annual benefits open enrollment, this step will need to be done after annual benefits open enrollment in mid-November. For new employees, this step will occur after HMO Illinois receives your enrollment record, approximately two weeks from the time you made your on-line election using the enrollment application.

Step 7: Establish a Health Savings Account with Benefit Wallet (Mellon Bank) if enrolled in the CDHP

A. You must establish a Health Savings Account with Benefit Wallet (ACS Mellon Bank) if you enroll in the CDHP and do not already have an HSA with Mellon.

To Apply for a Health Savings Account, after enrolling:

Go to the website https://mybenefitwallet.com/ to set up your Health Savings Account. You will need to establish your account with ACS Mellon BEFORE contributions can be made by you or the university.

1. Click on “1st Time User” in the upper right corner
2. On the E-Registration enter your personal information
   ⇒ Enter a User id of your choice that you will be able to easily remember
   ⇒ Click on the ‘Check Availability’ box on the right to ensure that your chosen User id is not being used by another client.
   ⇒ Use your Social Security Number, without dashes
   ⇒ Click on ‘Submit’
3. A Welcome Kit will be mailed to you with a 14-digit account number

Once your Health Savings Account is established, you will receive a debit card in the mail for use with your account.
B. Be Aware of Restrictions if also Covered by a Health Care Flexible Spending Account (FSA) Plan
   • If enrolled in an HSA, you or your spouse may only participate in a Limited Purpose FSA (LP FSA). Only eligible dental and/or vision expenses can be submitted through the LP FSA (see the Flexible Spending Account Summary Plan Description on the HR website).

Caution:
If you or your spouse have established a medical Full-Purpose FSA for the current year which has a “grace period” (such as the DePaul FSA), you must have a zero (0) balance in the plan by December 31st to receive the employer contribution and begin making employee contributions in January of the following year. If you do not have a zero balance, you will not be able to have contributions made to your Health Savings Account until April 1st of the next calendar year.

IMPORTANT: If you do not establish a bank account, DePaul University will not be able to make the employer contribution to your Health Savings Account.

The university makes a contribution for all eligible active employees who enroll in the CDHP. DePaul provides the entire annual employer contribution to participants following an employee’s enrollment and establishment of an HSA account. Employees who become HSA eligible mid-year will receive a pro-rated lump sum contribution based on the remaining months in the calendar year.

Once your HSA account has been established, employee contribution amounts made through DePaul can be changed prospectively for any reason throughout the calendar. Mid-year changes can be made by completing DePaul University Health Saving Account (HSA) Contribution Election Change Form.
**Flexible Spending Accounts (FSAs)**

New employees have an opportunity to establish flexible spending accounts within 31 days of their hire date or annually each year during annual benefits open enrollment. Flexible spending account elections cannot be carried forward from the current year into the next calendar year. All employees must re-elect a health care and/or dependent care flexible spending account with a specified annual contribution amount each year.

**Flexible Spending Account Options**

Flexible Spending Accounts (FSAs) allow faculty and staff to take pre-tax deductions from their pay to fund an account(s) that can be used to cover medical or dependent care expenses that are not reimbursed through insurance. Two general types of FSAs are available through the University's benefit program.

- Health Care Flexible Spending Account
- Dependent Care Flexible Spending Account

Due to the tax-favored nature of an FSA, all non-tax favored dependents (SDA, Child of SDA, or non-tax favored child dependent) are excluded from eligible FSA reimbursement.

The amount deducted from your pay to fund either type of FSA reduces one’s taxable income. For example, if you earn $3,000 a month and contribute $200 to an FSA, you pay taxes on only $2,800. See IRS Publications 502 and 503 at [http://www.irs.gov](http://www.irs.gov) or consult your tax advisor for more details.

**Important – USE IT OR LOSE IT**

The IRS requires you to forfeit any funds in your flexible spending accounts for which you did not incur eligible expenses by the end of the Grace Period (March 15th) following the plan year in which you are enrolled. Also, you must file claims for reimbursement no later than March 31st following the end of the plan year or you will forfeit any remaining funds in your account.

**What Happens if You Do Not Establish a Flexible Spending Account?**

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<thead>
<tr>
<th>Benefit Plan</th>
<th>New Employee</th>
<th>Current Employee</th>
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<tbody>
<tr>
<td>If you do not take action:</td>
<td>Within 31 days of your employment</td>
<td>During annual benefits open enrollment</td>
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<tr>
<td>start date</td>
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</tr>
<tr>
<td>Health Care Flexible</td>
<td>You will not have a FSA with DePaul.*</td>
<td>You will not have an FSA in the next calendar year even if you have an account in the current year *. Contributions to the Health Care Flexible Spending Account and the Dependent Care Flexible Spending Account will cease December 31st of the current year unless you re-enroll.</td>
</tr>
<tr>
<td>Accounts</td>
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</tbody>
</table>

*You will not be able to elect coverage until the next annual benefits open enrollment period unless you have a qualifying family status change.

**Health Care Flexible Spending Accounts**

The Health Care Flexible Spending Account (Health Care FSAs) options are comprised of the:

- Full-Purpose (FP) Health Care FSA (for employees who do not contribute to a Health Savings Account through the CDHP); and the
- Limited Purpose (LP) Health Care FSA (for employees enrolled in the CDHP or who otherwise make or receive contributions to a Health Savings Account (HSA)).

You may contribute a minimum of $100 up to $2,700 to the Health Care FSA per plan year.

**Dependent Care Flexible Spending Account**

The Dependent Care FSA provides reimbursement for eligible expenses of dependents who are, in general, your tax dependents and who meet specific criteria. Special rules apply to children of divorced or separated parents. General information about eligible and ineligible (non-tax deductible) expenses can be found in IRS Publication 502 and 503 available at [http://www.irs.gov](http://www.irs.gov) (click on the “Find Forms and Publications” link).

Your maximum annual contribution to the Dependent Care FSA depends on your marital and income tax filing status. For single participants and married participants (filing tax returns jointly), the maximum contribution is $5,000 per year. The minimum annual contribution is $500.

Eligible expenses under the Dependent Care FSA are the same expenses that would permit a dependent care tax credit on your federal income tax return. To help determine whether the federal child and dependent care tax credit or the Dependent Care FSA would be more advantageous to you, you may wish to consult a qualified tax advisor.
Pre-tax Features
As defined by the cafeteria plan rules in Section 125 of the Internal Revenue Code, you will fund your flexible spending account(s) with pre-tax dollars. That is, the amount that is taken from your pay to fund your account(s) is excluded from your income before Social Security (FICA), federal, and state income taxes are calculated, in effect, lowering the amount of your taxable income.

Paying less in Social Security taxes may have an impact on your future Social Security benefits. Your eligibility to receive a benefit from Social Security is not affected, but the actual monthly benefit amount you receive may be slightly less.

In order to meet IRS-required funding parameters, there is a chance that the FSA contribution amount you elect will need to be decreased by the University. If such action is necessary, you will be notified prior to the reduction going into effect.

Flexible Spending Accounts (FSAs) Enrollment Steps

Step 1: Select FSA Plans in which to Enroll
- For detailed plan information, see the Flexible Spending Account Summary Plan Description or the Flexible Spending Accounts website.
- Review and understand the flexible spending account options.

Step 2: Decide How Much to Contribute

Carefully estimate your eligible expenses for the next year. Remember that you will forfeit any remaining funds in your account that are not used to reimburse eligible services and products that were purchased during the calendar year through the grace period.

Step 3: Enroll in the Chosen Plans and Confirm Your Enrollment

See the Instructions for Using the Self-Service Enrollment Application.

Remember: Your current contributions will cease on December 31. You must re-establish your FSA contributions each plan year.
Life Insurance and Disability Benefits

DePaul University automatically provides all eligible employees with employer paid basic group life insurance, short-term disability insurance, and long-term disability benefits. Enrollment is not necessary.

Basic Group Life
- 1.5 times annual base or contract salary, up to a maximum of $300,000.
- Basic life insurance benefits in excess of $50,000 are subject to imputed income.*
- Benefit is payable at the time of death, or in advance if qualifying for the "Living Choice" option.
- Benefit reductions start at age 65.

*According to Section 79 of the Internal Revenue Code (IRC), if your Basic Term Life Insurance benefit is greater than $50,000, the University paid premium for the amount over $50,000 is treated as taxable income and taxes will be withheld from your paycheck. Your imputed income is reported on your annual Form W-2 based on IRS requirements. On your paycheck stub, this taxable amount appears as “BLIFE” under “Employer Paid Benefits”.

Short Term Disability (STD)
DePaul University provides all eligible employees with salary continuation during short-term disability.
- Employees who complete six (6) months of full-time service become eligible for STD.
- STD provides salary continuation to eligible faculty and staff who are unable to work due to a qualifying illness or injury.
- Eligible employees receive 100 percent of their base or contract salary for approximately half of their approved STD leave (14 weeks) and 60 percent of base or contract salary for the balance of the approved leave to a maximum total of 26 weeks.
- Benefits eligibility is based on approval by a physician and the leave administrator.

Long Term Disability (LTD)
LTD provides benefits for employees who are unable to work due to illness or injury for an extended period of time.
- Pre-existing condition waiting period.
- After STD benefits are exhausted, the LTD plan may pay 66-2/3 percent of base or contract salary, less benefits received from Social Security or Workers’ Compensation, up to a maximum of $15,000 per month.
- Generally, benefits continue until the employee is no longer permanently and totally disabled, becomes otherwise ineligible, or reaches age 65.
- Benefits eligibility based on approval by the insurance carrier.

Voluntary Life Plans that Require Enrollment
The Supplemental Life Plan, the Accidental Death and Dismemberment Plan, and the Dependent Life Plan require enrollment for those who want to participate.

What Happens if You Do Not Enroll in the Optional Life / AD&D Plans?

New Employees - if you do not enroll within 31 days of your employment start date*:

<table>
<thead>
<tr>
<th>Benefit Plan</th>
<th>What Happens (Default)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplemental Life Insurance</td>
<td>You will not be enrolled in supplemental life (although you will have basic life insurance).*</td>
</tr>
<tr>
<td>Accidental Death &amp; Dismemberment (AD&amp;D)</td>
<td>You will not be enrolled in the Accidental Death and Dismemberment Plan.</td>
</tr>
<tr>
<td>Dependent Life Insurance</td>
<td>Your dependents will not be enrolled in the dependent life insurance plan.*</td>
</tr>
</tbody>
</table>

Current Employees – If You Take No Action During Annual Benefits Open Enrollment*:

<table>
<thead>
<tr>
<th>Benefit Plan</th>
<th>What Happens (Default)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplemental Life Insurance</td>
<td>You will retain the same level of life insurance in the next calendar year as you have in the current calendar year.*</td>
</tr>
<tr>
<td>Accidental Death &amp; Dismemberment (AD&amp;D)</td>
<td>You will retain the same level of AD&amp;D insurance in the next calendar year as you have in the current calendar year.</td>
</tr>
<tr>
<td>Dependent Life Insurance</td>
<td>You will retain the same level of life insurance for your dependents in the next calendar year as you have in the current calendar year.*</td>
</tr>
</tbody>
</table>

*You will not be able to increase coverage until the next annual benefits open enrollment period and the increase in coverage will be subject to Evidence of Insurability.
Restrictions in Making Changes
Carefully consider the elections you make during this enrollment period because you are not allowed to change your supplemental life, accidental death and dismemberment, or dependent life elections during the plan year (calendar year). Your next opportunity to make a change will be during the next annual benefits open enrollment period.

Supplemental Life Insurance
Eligible faculty and staff may purchase supplemental life insurance for themselves subject to the following parameters:
• Up to 5 x salary* (or base annual contract salary for faculty) to $500,000.
• Increases of any amount are allowed during annual Benefits Open enrollment, all subject to Evidence of Insurability.
• Benefit reductions start at age 65.

Note: *If you elect 4x or 5x salary during the new hire enrollment period, you will need to provide Evidence of Insurability before coverage is approved. For new hires, coverage of up to 3x salary may be elected initially without being subject to Evidence of Insurability.

Accidental Death & Dismemberment (AD&D) Insurance
AD&D insurance may be purchased by eligible faculty and staff for up to five (5) times their annual base or contract salary. The amount selected must be equal to the amount of supplemental life insurance coverage selected.

Dependent Life Insurance
Dependent life insurance may be purchased for spouses, dependent children, SDAs and children of SDA under this plan. You are automatically made the beneficiary for this coverage.

Two levels of coverage may be purchased:
• $20,000 for a Spouse or SDA / $10,000 for a Dependent Child
• $10,000 for a Spouse or SDA / $5,000 for a Dependent Child

If an employee enrolls during the new hire enrollment period, Evidence of Insurability is not required. Increases to coverage or new elections during annual benefits open enrollment are subject to Evidence of Insurability.

Life Plans Enrollment Steps
Step 1: Select Plans in which to Enroll
A. Understand the life plan options by reviewing the above summaries.
B. For more detailed plan information, see the Insured Programs Summary Plan Descriptions on the HR website

Step 2: Decide Who You Want to Cover

Step 3: Submit Form to Add Your Dependents (needed for dependent life only)
A. New Employees
   • If you want to cover a spouse and/or dependent children, add the individual(s) using the Dependent Add/Change form. Submit completed forms to the Benefits Department. The Benefits Department will then add these individuals to the system so that you can elect coverage for them when using the on-line enrollment application.
   • You will not be able to enroll these additional individuals in any benefit plan until the Benefits Department has added their records to the HR System.
B. Current Employees During Annual Benefits Open Enrollment
   • If you want to begin covering a spouse and/or dependent children, add the individual(s) by using the Dependent Add/Change form. Submit the completed form to the Benefits Department. The Benefits Department will then update these individuals in the system so that you can elect the appropriate coverage for them when using the on-line enrollment application.
   • You will not be able to add additional individuals in any benefit plan until the Benefits Department has added their records in the HR System.

Step 4: If Applicable, Enroll SDA / SDA Children
A. Before you enroll an SDA:
   Complete a Second Domiciled Adult Affidavit of Eligibility form and Declaration of Tax Status form and submit to the Benefits Department. The Benefits Department will then add these individuals to the system.
Step 5: Enroll in the Chosen Plans

See the Instructions for Using the Self-Service Enrollment Application.

Step 6: Supplement and Optional Life Insurance – Evidence of Insurability

New Faculty and Staff – You will have to provide Evidence of Insurability for any amount of Supplemental Life Insurance you elect for yourself in excess of three-times your base salary or annual contract salary.

Current Faculty and Staff at Annual Benefits Open Enrollment – You will have to provide Evidence of Insurability for any increase in Supplemental Life Insurance on yourself or dependent optional life insurance on your spouse or SDA. EOI is not required if you are selecting to cover only your dependent child(ren). The insurance carrier will send the approval or denial information to you and to HR. If approved, you (or your spouse/SDA) will be insured for the additional amount(s).

Step 7: Confirm Your Enrollment Selections

See the Instructions for Using the Self-Service Enrollment Application.

Step 8: Designate or Update Your Beneficiaries

Complete the Employee Life Insurance Beneficiary Designation process for your basic and supplemental (should you elect) life insurance coverage.
403(b) Retirement Plan

The DePaul University 403(b) Retirement Plan, allows faculty and staff the opportunity to accumulate tax-deferred retirement savings.

**Employee Contributions**
Employees may defer part of their salary into the 403(b) Plan through pre-tax payroll deduction instead of receiving it as cash compensation. When an employee makes such a contribution into the Plan, the taxation on the amount of the contribution is tax-deferred. The term, “tax-deferred” means that amounts deducted from a participant’s paycheck are not subject to state or federal income taxes at the time of the payroll deduction. Earnings on the money contributed are also tax-deferred. Accumulations in the plan are taxed only when withdrawn based on the federal and state tax rate in effect for the individual at the time of withdrawal.

Beginning January 1, 2019, all participating employees with elected deferral rates between 1 and 9% will be enrolled in the annual Automatic Increase Program, under which their deferral election will be increased by 1% each January until they reach 10% total deferral, unless they opt out by December 31st of the prior year. More details are available on the 403(b) page of the HR website or by logging into NetBenefits directly.

**DePaul Matching Contributions**
Employees are also eligible to receive a 10% University matching contribution upon meeting the following criteria:

- Completion of one year of service (and in some cases, at least 1,000 hours of work or the equivalent of 1,000 hours of work during the year),
- Attainment of age 21, and
- Salary Deferral of at least 5% to the Plan.

For full-time faculty and staff with previous full-time experience at another institution of higher education, the one year service requirement may be waived. Contact the Benefits Department at 312-362-8232 to inquire.

University matching contributions and employee deferrals are fully and immediately vested. That is, 100% of the University contributions and related earnings are fully owned by the participant and none are forfeited should the employee terminate employment.

**Investment of Contributions**
A participant in the Plan may direct his or her own contributions, University matching contributions, and related earnings to funds available in the Plan’s fund line-up. If you do not complete an investment election, any contributions (employee deferrals and University match) made to the Plan will be invested in the appropriate Vanguard Target Retirement Fund based on your date of birth. See the 403(b) Page for more information about the default investment.

**Enrollment Steps**
Eligible employees can elect to begin participation or change their election at any time subject to plan rules. Visit the 403(b) page of the HR website for information on how to begin participation or to make election changes.

**What Happens if You Do Not Enroll in the 403(b) Plan?**

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<tr>
<th>Benefit Plan</th>
<th>New Employee</th>
<th>Current Employee</th>
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<tr>
<td>If you do not take</td>
<td>Within 60 days of your employment start date</td>
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<td>action:</td>
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<td>enrollment</td>
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<tr>
<td>403(b) Retirement Plan</td>
<td>You will be automatically enrolled at a 5% pre-tax</td>
<td>You can make election changes</td>
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<td>savings rate, with an annual 1% deferral rate</td>
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<td>increase until you reach 10% total deferral. An</td>
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<td>account will be established for you at Fidelity,</td>
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<td>appropriate Vanguard Target Retirement Fund</td>
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<td>Increase Program each year</td>
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<td>necessary. Your elections</td>
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<td>new election.</td>
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*You can make an election or opt out of the 403(b) Plan at any time, subject to the plan provisions. Visit the 403(b) page for full details.
Work-Life Benefits and Programs

Tuition Program

Tuition Waiver
All full-time faculty and staff are eligible for tuition waivers (free tuition) beginning the first quarter or semester in which they are employed provided their full-time employment date is prior to the last day to drop classes with no penalty (refer to the academic calendar). Tuition waivers are allowed for a maximum of eight (8) credit hours per quarter or ten (10) hours per semester within the College of Law. After one (1) year of full-time service, spouses or Unrelated SDAs and dependent children of employees are eligible for tuition waivers. Spouses or Unrelated SDAs are eligible for full tuition waiver for undergraduate and graduate courses, while dependent children are eligible for waivers of 100 percent at the undergraduate course level and 50 percent at the graduate level. Waivers are taxable in certain situations and certain restrictions apply, as defined in the policy at http://policies.depaul.edu.

Tuition Exchange Program
A national scholarship exchange program is available for dependents of full-time employees, the Tuition Exchange, Inc. Dependent children of full-time faculty and staff with at least one (1) year of full-time service who are pursuing their first bachelor's degree may apply for a scholarship at participating "host" schools. Dependent children may be eligible to attend any school participating in the program on a full tuition exchange scholarship or at a significant tuition reduction if the dependent child is awarded a tuition exchange scholarship.

More information, including a list of participating colleges and universities, can be viewed on the Tuition Benefits website.

Enrollment Steps
Eligible employees can elect to begin participation at any time subject to policy guidelines. See the Tuition Policy on the DePaul University Policies and Procedures website http://policies.depaul.edu for enrollment instructions.

Transportation Program
DePaul University’s transportation plans enable faculty and staff members to pay for Mass Transit and Parking expenses on a pre-tax basis. Amounts deducted to fund these plans reduce taxable compensation up to statutory limits. Employees may prospectively enroll or discontinue participation in these plans at any time.

Mass Transit
The CTA's Ventra system is available through this program. Restrictions may apply.

Parking Account Plan
Eligible parking expenses, including the cost of parking a car on or near university premises as well as parking near a mass transit facility for the purposes of taking mass transit to campus, can be paid through this program. Eligible expenses do not include residential parking costs.

Enrollment Steps
Eligible employees can elect to begin participation at any time subject to program guidelines. See the Transportation page on the HR website for enrollment instructions.
Vacation Policy (12 Month Staff Employees Only)

Vacation is accrued each pay period up to the annual levels presented below. A maximum of five days of accrued vacation may be carried-over into the next calendar year.

Full-time non-exempt staff employees:
- Two weeks of paid vacation for the first three years of cumulative full-time service.
- Three weeks of paid vacation, after three years of cumulative full-time service.
- Four weeks of paid vacation, after ten years cumulative full-time service.

Full-time exempt staff employees:
- Three weeks of paid vacation for the first ten years of cumulative full-time service.
- Four weeks of paid vacation, after ten years of cumulative full-time service.

Full-time Librarians: Four weeks of paid vacation beginning with the first year of full-time service.

No enrollment is necessary, but approval of requested time off is required by management.

Holidays
The university observes the following paid holidays:

- Martin Luther King Day
- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Break (Thursday and Friday)
- Christmas/New Year's Break (the week between Christmas and New Year's Day)
- Saint Vincent DePaul Day
- Two Floating Holidays (12 month staff employees only)

DePaul University values religious diversity among its faculty and staff. Out of respect for the many religious holidays of different faiths that take place while the university is in session, the university will make appropriate accommodations to allow faculty, staff and students to live and fully express their faith commitments.

No enrollment is necessary, yet approval of requested time off (such as accrued vacation time, floating holidays and flexible scheduling) is required by management and employees will need to work with their supervisors in making these arrangements.
DePaul University offers a range of policies and programs to help faculty and staff effectively balance responsibilities of work with personal and family commitments and activities. Program highlights are presented below. While enrollment is not necessary, completed forms or documentation may need to be submitted and management approval may be required.

Leaves of Absence
Several types of leave of absence are available to eligible faculty and staff. They include:
- Family Medical Leave Act (FMLA)
- Short Term Disability
- Long Term Disability
- Maternity Leave
- Personal Leave (full-time staff only)
- Military Leave
- Voluntary Unpaid Time Off

For more information, visit the Leave of Absence page on the HR website.

No enrollment is necessary, but proper notification is required.

Employee Assistance Program (EAP)
The EAP provides information and resources to aid employee in dealing with many issues of daily living. Services include confidential short term counseling in person or by telephone. The program also includes
- financial and legal support and resources
- work-life solutions where a work-life specialist can do research for you and provide qualified referrals and customized resources to assist with childcare and eldercare needs, moving and relocation, college planning, home repairs, and pet care.

No enrollment is necessary. For information, online seminars, financial calculators and resources on a wide variety of topics, call ComPsych at (800-621-4124) or visit guidanceresources.com. The Organization Web ID is EAP4DPU.

Flexible Work Arrangements
The university has several policies designed to support flexible work hours in order to help faculty and staff balance their work, family and personal commitments. These include flexible start and end times, compressed work weeks, telecommuting, and voluntary reduced work time. Refer to the Flexible work arrangement policy and Telecommuting policy for additional details.

No enrollment is necessary, but approval of work schedules is required by management.

Bright Horizons Care Advantage
The Care Advantage Program provides access to back-up care services. The services include center-based and in-home care for children, and in-home care for adults. Co-pays and limits apply. Refer to the Work/Life Balance page for additional details.

Adoption Assistance Program
The Adoption Assistance Program reimburses faculty or staff members’ qualified expenses related to the adoption of an eligible child to a maximum of $2,000 per adoption. In the event that both parents are employed by the university expenses will be reimbursed only once per adoption, to the $2,000 maximum. Qualified expenses for adoptions conducted through a licensed agency consist of those expenses that are reasonable, necessary and directly related to the legal adoption of an eligible child.

No enrollment is necessary, but appropriate documentation is required.

Auto/Home/Renters Insurance
Discounted auto/home/renters insurance is available to faculty and staff through Metlife. To receive a quote, call 1-800-438-6388.
Important Notices

Children’s Health Insurance Program (CHIP)
Some states provide premium assistance programs to individuals who are eligible for employer provided health insurance but are unable to afford the premiums. For additional information, refer to the CHIP Notice located on the Human Resources website.

Newborn’s and Mother’s Protection Act
The minimum stay for mothers and newborn children is 48 hours following a normal delivery and 96 hours following a cesarean section. Providers are not required to obtain authorization from the Plans or the claims administrator for prescribing a length of stay not in excess of the above periods.

Women’s Health and Cancer Rights Act of 1998
The Women’s Health and Cancer Rights Act of 1998 was enacted on October 21, 1998, and requires that all health plans cover post-mastectomy breast surgery if they provide medical and surgical coverage for mastectomies. If you and/or your eligible dependents receive benefits under ANY of DePaul’s medical plans, the plan must cover: Reconstruction of the breast on which the mastectomy was performed, Surgery and reconstruction of the other breast to produce a symmetrical appearance, Prostheses, Treatment for physical complications of all stages of mastectomy, including lymphedemas.

Benefits required under the Women’s Health and Cancer Rights Act would be provided on a consultation basis between the patient and attending physician. These benefits are subject to the same medical plan deductibles, co-payments and coinsurance that apply to any other benefit under the specific plan.

Availability of Notice of Privacy Practices
The Health Insurance Portability and Accountability Act of 1996 (HIPAA) imposes numerous requirements on employer health plans concerning the use and disclosure of individual health information. This information, known as protected health information (PHI), includes virtually all individually identifiable health information held by a health plan – whether received in writing, in an electronic medium, or as oral communication.

DePaul University complies with the above-stated requirements and maintains a Notice of Privacy Practices that describes them. This Notice of Privacy Practices is available to all participants in the DePaul University Health Plans.

This notice can be found in the Benefits Section of the Human Resources website (https://hr.depaul.edu) or can be requested by contacting the Benefit Helpline at (312) 362-8232.

While the University expects to continue Health and Welfare Benefit plans indefinitely, it reserves the right to terminate, suspend, withdraw, amend or modify all or any part of the plans, or to change the cost of coverage, at any time without notice. Any such change or termination of the plans will be based solely on the decision of the Plan Sponsor and/or the Plan Administrator and may apply to any or all groups of employees – including active and disabled employees, and current or future retirees and their dependents – as determined under the Plan.

No supervisor, manager or other representative of the University has any authority to enter into any oral or written agreement contrary to the foregoing or contrary to the terms of any summary plan description, applicable plan document, and / or policy.

This document does not supplement or modify the actual plan provisions that are described in the underlying plan documents and policies. Summaries of the plan documents (the Summary Plan Descriptions) can be found on the HR website at https://hr.depaul.edu. Policies are posted on the University’s Policies and Procedures site at http://policies.depaul.edu.